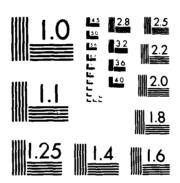
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THE EFFECTS OF FABRICATION TECHNIQUES AND STORAGE METHODS ON THE DIMENSIONAL STABILITY OF REMOVABLE ACRYLIC RESIN ORTHOSES

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THESIS

Presented to the Faculty of

The University of Texas Graduate School of Biomedical Sciences

at San Antonio

in Partial Fullfillment

of the Requirements

for the Degree of

Ву

MASTER OF SCIENCE

David Mark Bohnenkamp, B.S., D.D.S.

San Antonio, Texas

May, 1987



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7. Author(s) David Mark Bohnenkamp		8. CONTRACT OR GRANT NUMBER(s)						
9. PERFORMING ORGANIZATION NAME AND ADDRESS AFIT STUDENT AT: University of Texas		10. PROGRAM ELEMENT, PROJECT, TASK AREA & WORK UNIT NUMBERS						
11 CONTROLLING OFFICE NAME AND ADDRESS AFIT/NR		May 1987						
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		UNCLASSIFIED 15. DECLASSIFICATION/DOWNGRADING SCHEDULE						
16. DISTRIBUTION STATEMENT (of this Report)								
APPROVED FOR PUBLIC RELEASE; DISTR								
18. SUPPLEMENTARY NOTES APPROVED FOR PUBLIC RELEASE: IAW	AFR 190-1	LYIN E. WOLAVER () Dean for Research and Professional Development AFIT/NR						
19. KEY WORDS (Continue on reverse side if necessary and 20. ABSTRACT (Continue on reverse side if necessary and ATTACHED)								

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THE EFFECTS OF FABRICATION TECHNIQUES AND STORAGE METHODS ON THE DIMENSIONAL STABILITY OF REMOVABLE ACRYLIC RESIN ORTHOSES

DENTAL GARAGE David M. Bohnenkamp, Major, DC, USAF

Several empirical claims appear in the literature for improved dimensional stability when utilizing a particular fabrication technique for interocclusal orthopedic/stabilization appliances. The primary objective of this study was to utilize five specific fabrication techniques and two storage methods to construct and store acrylic resin specimens, and to visualize and quantify their linear dimensional change over a two week time period. An original research model was developed to approximate more closely the tooth#coverage limits of removable acrylic resin orthoses. Four pindex pins were transferred to each individual specimen and measurements were made of the distances between the inside diameters of the pins. Ten specimens were fabricated on individual die Θ stone casts for each of the five techniques. After construction, initial measurement, and removal from their cast, each specimen was stored in either a wet or dry environment for the duration of the study. Measurements between pins were made and recorded at five time intervals. No significant difference in dimensional change was noted between the one-stage and three-stage segmental sprinkle-on autopolymerizing acrylic resin fabrication techniques. The one√stage sprinkle4on technique resulted in less dimensional change than the dough application, vacuum adapted resin sheet and dough application, and heat-cured denture processing techniques. Specimens stored in a wet condition showed less distortion after two weeks.



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THE EFFECTS OF FABRICATION TECHNIQUES AND STORAGE METHODS ON THE DIMENSIONAL STABILITY OF REMOVABLE ACRYLIC RESIN ORTHOSES

David Mark Bohnenkamp

APPROVED:

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DEDICATION

I want to dedicate this Thesis to the three people who have made this all possible.

First to my parents, Robert and Peggy Bohnenkamp who have always provided encouragement and emotional support. They have been supportive of all my endeavors in life, but especially of this one. I want to thank my Mom and Dad for helping make so many things possible.

To my loving friend, Lily Garcia, this Thesis is dedicated. She has always encouraged me to do my very best and take that extra step. She has given me tremendous emotional support throughout my entire prosthodontics graduate degree program, but especially during the writing of this Thesis.

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I want to express my sincere thanks and dedicate this Thesis to my parents and my friend.

ACKNOWLEDGEMENTS

I would like to acknowledge Dr. William A. Kuebker (Professor, Department of Prosthodontics) for serving as my supervising professor. He was a tremendous help during the preparation of this Thesis. He always took time from his busy schedule to review my progress and offer his encouragements.

I would also like to acknowledge Dr. William J. Thrash for serving on my research committee. He graciously provided his time, resources, and knowledge for statistical analysis of the data. I will always be thankful to him for his personal insight and timely humor in solving problems.

I must also thank Dr. Barry K. Norling for serving on my research committee and allowing me unlimited access to the Biomaterials Research Laboratory for data collection. He always encouraged me to think critically and ask questions.

I would also like to thank the remaining members of my research committee, Dr. Kenneth D. Rudd, for his suggestions and encouragement during this Thesis, and, Dr. Charles R. Dufort, for his instruction and inspiration during my post-doctoral graduate training in prosthodontics.

THE EFFECTS OF FABRICATION TECHNIQUES AND STORAGE METHODS ON THE DIMENSIONAL STABILITY OF REMOVABLE ACRYLIC RESIN ORTHOSES

David Mark Bohnenkamp

The University of Texas Graduate School of Biomedical Sciences at San Antonio

Supervising Professor: William A. Kuebker, D.D.S., M.S.

Numerous articles and chapters have been written describing various construction methods for interocclusal stabilization appliances (orthoses). A review of this literature revealed several claims for improved dimensional stability when utilizing a particular fabrication technique. An investigation of the dimensional stability of various construction techniques, or of the empirical claims as to the advantages of a given technique, does not appear in the literature.

The purpose of this study was to design and conduct an experiment to determine if fabrication techniques and storage methods affect the dimensional stability of removable acrylic

resin orthoses. The primary objective of this investigation was to utilize five fabrication techniques and two storage methods (representative of those in the literature) to construct and store acrylic resin specimens, and to visualize and quantify their linear dimensional change with a measuring microscope.

A computer designed and machined master aluminum die as an original research model for fabricated to serve investigation. The aluminum die was constructed to approximate more closely the tooth-coverage limits of removable acrylic resin orthoses. Pindex pins were placed parallel to each other at canine and second molar areas of the research die. The locations of the pins were designated A, B, C, and D. Fifty improved dental stone research casts were made of the master aluminum model. locations of the pins were transferred The each research cast.

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Five specific fabrication techniques, designated A, B, C, D, and E, were utilized to construct 50 acrylic resin specimens. Ten specimens were fabricated on individual die-stone casts for each of the five fabrication techniques. The design of each specimen ensured coverage of the lingual and occlusal surfaces (approximately 3 mm thick) and 3 mm of the buccal surfaces of the research cast arch form. Design A consisted of a one-stage sprinkle-on autopolymerizing acrylic resin technique. Design B consisted of a three-stage segmental sprinkle-on autopolymerizing acrylic resin technique. Design C consisted of autopolymerizing acrylic resin dough application technique. Design D consisted of

a vacuum-adapted resin sheet and autopolymerizing acrylic resin dough application technique. Design E consisted of a heat-cured acrylic resin denture processing technique.

After construction, initial measurement, and removal from their individual die-stone research cast, each specimen was stored in either a wet or dry environment for the duration of the study. Fifty percent of the available specimens from each design group were selected and stored in water in a zip-lock bag at room temperature. The remaining specimens were stored in air in a zip-lock bag at room temperature.

As a method to determine the dimensional stability of specimens, the distances between the inside diameters of the four pins were measured with a measuring microscope. These distances were designated A-B, C-D, A-C, and B-D, and respectively represented anterior, posterior, left, and right dimensions of the casts and specimens. Baseline measurements were made between the pins and recorded at the following time periods: Measurement, on die-stone research cast; On Cast. after fabrication of specimen; O Hours, specimen off cast; 24 specimen stored wet or dry; 72 Hours, specimen stored wet or dry; and Two Weeks, specimen stored wet or dry. Cumulative dimensional change was calculated by subtracting the measurement from the measurement at each time period.

The following results and conclusions can be drawn from statistical analysis and evaluation of mean cumulative linear

dimensional change across design, storage condition, location, and time:

- 1. No significant difference in linear dimensional change was noted between the one-stage and the three-stage sprinkle-on fabrication techniques at any of the locations at any of the time periods (p < .05).
- 2. This result suggests that the incorporation of three stages in a sprinkle-on technique for autopolymerizing acrylic resin does not seem to offer any advantages in terms of minimizing linear dimensional change when compared to a one-stage sprinkle-on technique.
- 3. The one-stage sprinkle-on technique (Design A) demonstrated significantly less dimensional change than the dough application (Design C), the vacuum-adapted resin sheet and dough application (Design D), and the heat-cured denture processing (Design E) techniques at location C-D for all five time periods (p < .05), except for Design E at Time 1 (On Cast minus Initial Measurement).

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4. The heat-cured acrylic resin denture processing technique (Design E) demonstrated significantly less dimensional change than the vacuum-adapted resin sheet and dough application technique (Design D) at the posterior location C-D at all time periods (p < .05), except at Time 2 (24 Hour minus Initial Measurement).

- 5. All specimens stored in a wet environment demonstrated significantly less linear dimensional change two weeks after fabrication than specimens stored in a dry environment (p < .05).
- 6. These results suggest the laboratory utilization of an autopolymerizing acrylic resin sprinkle-on fabrication technique and a wet storage method to minimize linear dimensional change prior to the clinical use of a removable acrylic resin orthosis.

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I. INTRODUCTION

No treatment for dental disease has been characterized by more variety of concept and technique than that of interocclusal stabilization appliance therapy. Numerous articles and chapters have been written describing various construction methods for these orthotic appliances. A review of this literature reveals several unsubstantiated claims for a more accurate and precise fit when utilizing a particular fabrication technique.

Because the success of an "oral orthosis" (47) depends on how well it fits, dimensional stability during the construction process is critical. It is reasonable to assume that a construction technique should exist for removable acrylic resin orthoses which can minimize distortion, eliminate mechanical stress, improve strength, and provide for a precise fit. It is suprising, however, to find that an investigation of various construction techniques, or empirical claims as to the advantages of a given technique, does not appear in the literature as of today.

The purpose of this study is to design and conduct an experiment to determine if fabrication techniques and storage methods affect the dimensional stability of removable acrylic resin orthoses. This analysis will facilitate the laboratory selection of a fabrication technique displaying minimal distortion and clinical use of an orthosis having a precise and accurate fit.

II. LITERATURE REVIEW

A. Terminology

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The therapeutic use of interocclusal stabilization appliances, or intraoral orthoses, by clinicians has contributed significantly to the rehabilitation of dental patients suffering from disorders such as bruxism (53,66,114,137), acute or chronic temporomandibular joint pain (21,23,40,48,51,57,113,118,150,157), posterior condylar displacement (35,45,146), myofascial pain dysfunction (2,14,26,29,55,56,81,90,99,125), overclosed vertical dimension (30,52,97,98,149), and malocclusions (75,82,93,145).

In similar fashion, researchers have successfully utilized removable acrylic resin orthoses in their studies of the electromyographic activity of jaw muscles (25,36,72,77,91,133), the reproducibility of pantographic recordings (11,33,120), the duration of silent periods (13,15,96), and the relation of mandibular position to muscle strength (54,67,108,122,151,155).

Numerous articles (1,3,8-10,12,16-18,27,31,34,37,38,42-46,59-62,64-68,71,75,80,83-89,95,102,103,109,117,123,124,126-129,134 136,139,142,144,147,156) and chapters (7,76,93,105,116,145) have been written describing various construction techniques for these interocclusal appliances. Widely varying terminology has been linked with specific appliance designs, fabrication techniques, and therapeutic uses, including many appliances bearing the author's own name. The common thread that connects all of the different oral orthoses, regardless of their names, is the idea

of keeping the teeth apart. How this goal is accomplished, and what purpose it is to serve, are the major sources of differences in the design and use of these appliances.

In <u>Encyclopedia and Dictionary of Medicine and Nursing</u>, orthosis is defined as a brace or other orthopedic device that is applied to an existing segment of the body for the purpose of protecting the segment or assisting in restoration or improvement of its function (94). In "A technique for construction of a temporomandibular occlusal stabilization splint - an orthotic appliance," Gjerde, Clark, and Solberg defined orthosis as an orthopedic appliance used to support, align, prevent or correct deformities or to improve the function of movable parts of the body (46).

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Many of the concepts and terms used throughout this thesis, although commonly undefined, have been used descriptively by various investigators and authors in different ways. In <u>Current Clinical Dental Terminology</u>, Carl O. Boucher defined the following terms: bite guard, bite plane, bite plate, night guard, and occlusal splint (19). Some questions remain regarding the vagueness of these terms, as well as their utility and usefulness in prosthodontics.

In the <u>Glossary of Occlusal Terms</u>, the use of the term "oral orthosis" is recommended to help eliminate the confusion facing teachers and writers of scientific information by providing terminology that would make communication consistent and uniform (47).

B. Design and Fabrication Techniques

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Although the terms "bite plane" and "bite plate" have been used interchangeably over the years, these devices were actually designed for different purposes. The bite plane was introduced into orthodontic use by Kingsley in 1872 (74). A vulcanite appliance, which covered the palate, sloped into a steep inclined plane anteriorly for guiding the mandible into a more forward position. It was hoped that eventually a retrognathic mandible would permanently retain this forward position. Kingsley was the first to perform this operation known as "jumping the bite."

In 1900, Ottolengui expressed the opinion that if an inclined plane on mandibular anterior teeth could retrude the psuedognathic jaw, the reverse could occur by placing an inclined plane on the maxillary anterior teeth (107). Ottolengui's bite plate was made of iridio-platinum fitted with clasps about the molars and a wire which came around the front of the arch. The plate was fitted with an inclined plane which was intended to jump the bite.

Karolyi, in 1906, recognized additional etiologic factors for "pyorrhea alveolaris", a condition he described and treated in 1901 with bite-raising gold crowns (69). He recommended treatment with a removable vulcanite splint to separate jaws, thus preventing trauma from worn and sharp migrated teeth that also wounded soft tissue (70).

In 1907, Angle used the inclined plane developed by Ottolengui as an active as well as a retaining device (40).

However, he noted that "jumping the bite" into an anterior position was ineffectual. This course eventually led him to introduce the use of intermaxillary elastics.

Hawley, in 1919, introduced a bite plane with a steeply inclined anterior plane (62). The principal use of Hawley's device was as a retainer rather than as a jaw positioner. The removable bite plane consisted of a rubber palatal plate fitting against the lingual surfaces of the teeth. From the plate, back to the cuspids, passed a 19-gauge gold wire which was formed into loops, and between them, passed over the labial surfaces of the incisors, was a flat wire. Attached to and extending backward from the 19-gauge wire was a bicuspid clasp. A flat ledge was built on the upper plate and extended in a bite plane to assist in correcting or holding mesio-distal relation where it was needed.

In 1933, Goodfriend incorporated vulcanite pyramids and smooth bite planes into a patient's maxillary and mandibular dentures (49). The patient had a history of dysarthosis of the mandible. On the lower denture on each side he constructed a pyramid. On the upper denture on each side he constructed a depression to exactly accommodate the lower pyramids. Smooth vulcanite planes were substituted for denture teeth in order to rest the mandibular articulation and to prevent occlusal trauma.

Sved, in 1944, analyzed the Hawley retainer and bite plate, and proposed that the original appliance must be modified in two important details in order to further improve its usefulness: 1)

the bite plate must be made tooth bearing instead of tissue bearing, and 2) the retention of rotated teeth must be more efficient (139). The Sved appliance consisted of a palatal or lingual base for the upper or lower teeth with an extension which covered the lingual surfaces of the six anterior teeth, then passed over the incisal edges and covered the incisal quarter of the labial surfaces.

In 1945, Sorrin presented a method for construction of a removable acrylic splint utilizing 21-gauge stainless steel wire for reinforcement and stabilization of periodontally involved teeth (134). Clear, heat-curing acrylic resin was used for processing the Sorrin splint.

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Block, in 1947, fabricated temporary, trial appliances to establish and verify centric relation, balanced occlusion, and vertical dimension for treatment of disturbances of the temporomandibular joint (16). He preferred the use of cemented silver splints or a combination of partial dentures and splints, although he noted a persistent problem with depression of posterior teeth.

In 1952, Ingersoll and Kerens constructed vinyl resin splints to overcome occlusal trauma related to bruxism (66). The splint was designed for mandibular arch coverage to take advantage of gravity, flanges were extended buccally to the mucobuccal fold and lingually to correspond to the outline of a lower complete denture. The splint area covering the lingual and

buccal gingiva was thought to be tissue-stimulating because of the massaging action of the splint under stress.

In 1956, Stahl presented a simplified procedure for fabricating a temporary removable acrylic bite plate (136). The initial fabrication utilized a sheet of thick thermoplastic material heat-adapted to either the upper or lower cast. A roll of autopolymerizing acrylic resin was placed on the occlusal surface of the bite plate. The patient's centric relation position was then recorded in the self-curing resin.

Sears, also in 1956, used occlusal pivots to prevent or alleviate denture problems (126). The prime function of the pivot teeth was to permit the condyles to descend toward their unstrained normal positions. Elevations (pivots) were built on the molar teeth with autopolymerizing plastic material to hold opposing bicuspids and anterior teeth apart. Usually the first molar was the farthest posterior position for the pivot.

In 1957, Campbell applied a traction principle found in orthopedics to the temporomandibular joint and devised a resilient type of intraoral orthopedic appliance to gently open the joint space (21). His technique involved fabricating two splints — one with a flat occluding surface worn separately in the first stages of traction, and both splints (on opposing arches) worn when the muscles had relaxed somewhat.

Perlow, in 1958, described an acrylic attachment which was built onto the labial wire section of a removable acrylic bruxism appliance (109) or bite plate. He felt that an acrylic

attachment on the labial of a bruxism appliance was an innovative way to aid in resistance to forces generated by the noxious oral habit.

In 1959, Grupe and Gromek described the fabrication of a bruxism splint which was completely toothborne using "quick-cure acrylic materials that offer the possibility of an absolutely accurate fitting of such an appliance" (59). They felt that many bruxism splints, up to that time, had proven to be orthodontic appliances.

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In 1960, Lackie adopted the use of a nightguard for treating the symptoms of bruxism (79). He advocated an occlusal equilibration be performed before fabricating the nightguard to correct occlusal disharmony. Lackie recommended construction of both an maxillary and mandibular splint when the patient presents with a gross occlusal discrepancy.

Odenheimer, in 1962, developed the "myotatic splint" to disrupt harmful jaw muscle action (103). The "myotatic splint" resembled other occlusal splints, except its greatest difference was its extent of occlusal correction. In fact, it strived for over correction. The splint raised the occlusal plane to such an extent that the patient could barely swallow. As soon as Odenheimer ascertained that the patient "had developed a new freeway space" while wearing his splint, a weaning off of the appliance was begun.

In 1963, Gecker and Weil described their fabrication of three bruxism appliances which tested the frequency, duration,

and severity of the bruxist oral habit (43). Indentations were fashioned intraorally by the patient into the occlusal surfaces of these night splints and were used to prevent the jaws from sliding or grinding against each other.

Courant, in 1967, recommended the use of removable acrylic resin splints in general dental practice to treat disturbing nonfunctional forces, bruxism, and tooth mobility (31). For Courant, poly(methylmethacrylate) afforded minimum porosity and ease of cleaning in construction of clear heat-processed acrylic resin splints.

Allen, the same year, described a technique for the fabrication of a retentive occlusal bite guard without the use of undercuts (3). All undercuts were surveyed on the stone casts and waxed out. The waxed bite guard was invested and processed with clear heat-curing acrylic resin. According to Allen, if properly fabricated, no adjustment should be needed to insert the appliance in the mouth.

Also in 1967, Shore recommended that biteplanes and Hawley biteplates should not be used in the treatment of TMJ dysfunction. Instead, he advocated his mandibular autorepositioning appliance (128) to allow the patient alone to determine the physiologic placement of the mandible in centric relation. He attached a roll of autopolymerizing acrylic resint to the acrylic palate over the occlusal surfaces of the maxillary teeth. The patient's centric relation was then recorded and the acrylic was allowed to harden in the patient's mouth. Shore

eventually established freedom of movement of the mandibular teeth against the acrylic resin in all functional ranges of articulation.

Askinas, in 1972, proposed that a proper occlusal splint should be made of highly polished hard acrylic resin (8). He felt that clasp retention may not be necessary in a fully dentate arch, as the splint will probably derive enough stability and retention from its coverage of all the occlusal and incisal surfaces. Askinas used soft or medium baseplate wax to form the splint. He invested and processed the splint using clear, heat-curing acrylic resin. The splint was meticulously fitted in the mouth using soft disclosing wax. The accurate and complete sealing of the splint on the teeth was of paramount importance to Askinas.

described appropriate products recorded interests.

Also in 1972, Farrar presented a technique for construction of a specially modified maxillary bite plane to simplify treatment for temporomandibular joint dysfunction (38). The author designed mesial inclines for this appliance to occlude against the distal inclines of the mandibular teeth for diagnosis and treatment of anterior dislocation of the articular disc.

Shulman, in 1973, described a technique to circumvent time-consuming construction and adjustment procedures for fabricating a bite plane (129). He adapted two thicknesses of base plate wax to a maxillary cast, made centric registrations in the patient's mouth, and followed usual lab procedures to duplicate the wax bite plane in clear heat-cured acrylic resin. Shulman noted that

there may be problems in seating the completed bite plane in the mouth due to processing changes or undercuts. He acknowledged that if retention is a problem, clasps can be added at the time of the wax-up.

Horn, the same year, recommended the economical construction of bite planes utilizing a vacuum-adapted miniplast splint (65). She applied autopolymerizing acrylic resin in a tooth shade to the occlusal surfaces of the splint base while it was in the patient's mouth. Repeated closing movements were accomplished to ensure the positioning of the mandible in centric relation. The splint was allowed to complete polymerization in the mouth. Horn preferred to position the bite plane in the mandibular arch because it was least disturbing to the patient.

Also in 1973, Dyer presented a method of determining the stability of the TMJ through the use of a maxillary orthopedic appliance (37). The author noted that should the appliance disclose an instability of the TMJ, the same may be used in an attempt to achieve stability. Dyer outlined 17 steps for the construction of a maxillary orthopedic appliance. Of special interest was his use of a refractory duplicate of the maxillary cast to construct cast gold clasps to aid in retention of the appliance in the mouth.

Becker, Kaiser, and Lemm, in 1974, described a simplified technique for fabricating night guards using the Omnivac vacuum adaptation unit and clear autopolymerizing acrylic resin (12). Jet repair acrylic resin was mixed into a dough and manually

placed over the occlusal portion of a clear Omnivac resin sheet. The cast and affixed appliance were placed in a pressure pot at 100 degrees F for 15-20 minutes at 20 p.s.i. pressure. The fit of internal surfaces of the night guard were tested using disclosing wax. Becker recommended two methods for "solving retention problems": 1) reline the internal surface of the night guard with autopolymerizing resin intraorally, or 2) add ball clasps interproximally.

Becker pointed out that most previously reported techniques for construction of night guards had involved forming the appliance in wax. He noted how the investing and processing techniques were similar to those used for complete dentures. These procedures, he felt, were not only time consuming and expensive, but there was also "a certain amount of inevitable distortion in the night guards due to processing" (12).

Also in 1974, Kornfeld described a technique for fabrication of an acrylic resin bite guard or night guard utilizing a baseplate wax form molded over the occlusal surfaces of teeth on articulated casts (76). The casts were mounted in centric relation and cuspal interferences were removed by moving the articulator protrusively and through right and left lateral excursions. After processing in clear acrylic resin, the cured bite guard was seated on the casts and adjusted, again checking all excursive movements.

Lerman, the same year, presented a new type of fluid-bearing interocclusal appliance, the hydrostatic appliance (83). The

active element of the hydrostatic appliance was a thin, flexible-walled, H-shaped, fluid-bearing cell held between the posterior teeth by attachment to a plastic plate. Lerman proposed that the use of the appliance permitted maxillomandibular relationships to be self-established automatically by the patient's muscles. Unfortunately, the hydrostatic cells had to be replaced as leakage occurred when cuspal contacts penetrated the fluid-bearing cell (84).

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In 1975, Langer introduced a palatal plate which could be constructed by the dentist for immediate use (88). Autopolymerizing acrylic resin was used intraorally in a doughlike mass to construct a flat occlusal surface just lingual to the anterior teeth. Langer found the immediate palatal plate to be therapeutically beneficial for relief of TMJ pain, for reduction of occlusal trauma, and for orthodontic tooth movement.

Block, in 1976, presented a direct functional chew-in technique for construction of bite guards that can be accomplished in three short office visits (17). He utilized a functional bite tray plus hard baseplate wax on occlusal surface of the tray to record direct functional chew-in for bite registration. The waxed appliance was then processed in clear, heat-curing acrylic resin. Block acknowledged that the technique of making records of the dynamic relationships of the jaws (direct functional chew-in) was developed by Meyer in 1934.

In 1977, Timm and Ash recommended the full-coverage occlusal bite plane splint as an adjunct to orthodontic treatment (142).

The construction technique recommended by the authors was that of a clear, heat-cured acrylic splint obtained by waxing the splint on a maxillary cast mounted in an articulator. Desired cuspid guidance in lateral and protrusive excursions and small centric stops were obtained in the wax pattern. Processing of the splint followed conventional complete denture technique. The authors emphasized that occlusal bite plane splints should not be considered a permanent form of treatment, although they may be used for extended periods of time, as with bruxism.

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Kass and Tregaskes, in 1978, felt that occlusal splints should be fabricated using orthodontic acrylic resin with a one-stage sprinkle-on technique (71). They postulated that the splint is usually constructed for the maxillary arch because it is possible to gain better retention and it is better tolerated. They employed the sprinkle-on technique to the vertical portion of the palate, as well as the buccal and occlusal surfaces of the teeth, to add stability, retention, and strength to the splint. The authors cautioned that premature removal from the cast would result in warpage of the acrylic resin frame. The bite registration surface of the frame was fabricated using manual dough application. The entire appliance was allowed to complete polymerization under air pressure.

In 1979, von Krammer presented a technique for construction of occlusal splints with the use of a surveyor to block out all undesirable undercuts (144). The appliance was waxed onto a

maxillary cast and processed according to complete denture flasking and processing techniques.

Adams, also in 1979, described a technique that "had as one of its advantages the accuracy and predictability of construction and fit" (1). He vacuum-adapted a clear resin splint over the maxillary cast, forming a template. Different waxes were added to the template to provide for a centric relation record and for adequate bulk for finishing the acrylic resin. Adams fitted the entire waxed splint and a stone index into a reline jig. He used autopolymerizing acrylic resin and processed the splint in 100 degrees F water and air pressure. Before he fitted the splint to the maxillary cast, he covered the cast with die relief agent or mercurochrome and applied a thin layer of cyanoacrylate adhesive. He then adjusted those areas that burnished and abraded the disclosed cast.

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Adams concluded that the most important aspect of splint fabrication was obtaining a precise centric relation record at a fixed vertical dimension of occlusion. He felt that the advantages of using a vacuum-adapted template as the foundation for the splint were dimensional stability and smoothness. Adams further concluded that processing acrylic resin in water under compressed air produced splints which were dimensionally more accurate than heat or air cured acylic resin (1).

Lundeen, also in 1979, described the fabrication of an occlusal splint by vacuum mixing acrylic resin into a dough and adapting it over the maxillary teeth and to the edges of the

blockout wax on a maxillary cast mounted on an articulator (88). the author reasoned that vacuum evacuation of air from the mix before it reaches the dough stage resulted in a cooler, slower-setting, and denser acrylic resin. Lundeen conluded that with this construction technique the splint should fit accurately without rocking.

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In 1979, Gelb reported the use of the mandibular orthopedic repositioning appliance (MORA) to treat craniomandibular syndrome (44). The Gelb appliance was constructed to cover the lower posterior teeth only. The author used a Galetti articulator for mounting the opposing casts and preferred to cure the the fast-setting acrylic appliance in a pressure cooker at 120 degrees F for 15 minutes.

Gjerde, in 1981, presented a technique for a maxillary occlusal stabilization splint that she said "provided for less dimensional change than previous heat-cured methods" (46). A baseplate wax pattern was flasked and processed using cold cure acrylic and the flasks were placed under 3500 lbs of pressure for only ten minutes. Utilizing this method, the authors concluded that the occlusal stabilization splint should routinely fit onto the maxillary teeth without difficulty.

Also in 1981, Rehany and Noah described a modified Hawley occlusal splint as it is used for oral rehabilitation (117). They constructed a flat, horizontal splint palatal to the maxillary anterior teeth, having a labial bow, and three-quarter clasps on the most posterior molars.

Okeson, in 1982, described the bite guard as a removable acrylic resin appliance that covers occlusal and incisal surfaces of the teeth on one arch and extends to the maxillary prominence of the facial and lingual surfaces of the teeth (105). He felt that the bite guard was a useful tool in the diagnosis and treatment of occlusion-related disease. Okeson's fabrication technique involved the use of a thick plastic resin sheet vacuum-adapted over the maxillary cast. The author used autopolymerizing acrylic resin to establish anterior centric contacts and eccentric guidance.

Also in 1982, Bates and Atkinson presented a method of fabrication of anteriorly-repositioned occlusal splints to treat anterior disc displacement (9). The principal concern of the authors with this type of treatment was the accuracy and repeatability of mandibular placement on the splint. They described construction of a splint that offered a reproducible position and could be used to reduce the chair time required for splint fabrication, delivery, and adjustment.

Hartman and Swepston, the same year, described a three-stage, sprinkle-on technique utilizing autopolymerizing orthodontic acrylic resin to fabricate a "mandibular stabilization prosthesis" (61). Their technique was based on the addition of separate sections of acrylic resin to the cast. Each section was allowed to complete polymerization before the next section was applied. The authors felt that this step-by-step technique "minimized warpage and ensured a more accurate fit of

the prosthesis" (61). The completed prosthesis was precisely fitted to the patient's maxillary teeth. Hartman and Swepston emphasized that all subsequent adjustments depended on this step. They concluded that their technique must be followed meticulously to achieve the desired results.

In 1983, Klineberg presented a critical assessment of the use of full-coverage occlusal appliances in prosthodontics (75). To be effective, he emphasized that such appliances must be designed correctly and regularly adjusted following fitting to maintain stability and provide balanced jaw support during excursive movements. The design of the splint, according to Klineberg, should ensure coverage of the lingual and occlusal surfaces and 2-3 mm of the labial and buccal surfaces of the teeth. The splint should be processed in clear heat-cured acrylic resin and have sufficient bulk to permit adjustment on it occlusal aspect.

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Bates et al, in 1984, presented a method for the single appointment fabrication of a maxillary occlusal splint (10). A splint base was made of clear splint material vacuum-formed over the patient's cast. Cold-curing resin was applied in a doughy stage to the occlusal surface of the splint base to custom fit the occlusion intraorally. The procedure described required approximately 90 minutes of patient time, of which 30 minutes was actual chair time. The authors cautioned that this splint would not last as long a heat-processed acrylic splint, but usually

lasted several months, often long enough to relieve acute TMJ dysfunction symptoms.

Most recently, in 1987, Haddix reported a simplified technique for rapidly producing a mandibular occlusal splint using a visible light-curing denture base system (60). The author claimed that the occlusal splint appears clinically to be more durable than those made of the traditional orthodontic autopolymerizing acrylic resin. Also, he mentioned that the visible light-curing acrylic resin offers the working time necessary to mold the splint to the exact form desired.

In retrospect, the common thread that connects interocclusal stabilization appliances, regardless of their origin, is the idea of keeping the teeth apart. How this goal is accomplished, and what purpose it is to serve, are the major sources of differences in the design, fabrication, and use of orthoses.

Numerous design features and construction techniques have been proposed and developed to cope with the inherent problems of distortion of removable acrylic resin orthoses. The ideal acrylic resin applicance should be dimensionally stable, well-retained, and easily fabricated in the dental office or laboratory (75). Although many of these design features can be incorporated into orthoses constructed of hard acrylic resin there continue to be functional characteristics that may result in adverse oral symptoms.

Clinicians and researchers have pointed out that tooth movement (63), periodontal ligament changes (119), temporo-

mandibular joint pain (23,101,148), and a variety of other problems (20) may be experienced by dental patients. While these clinical problems are significant, they represent symptomatic problems that may be related to the forces produced by distortion inherent in acrylic resin orthoses.

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Brayer and Erlich reported on the uses and dangers of occlusal night guards (20). They studied night guards made from wax models processed in acrylic resin according to the technique of complete dentures. The authors noted: 1) intrusion of posterior teeth due to wearing a night guard without interruption, 2) tooth migration, 3) occlusal trauma, 4) increased caries, and 5) increased gingival inflammation.

Weinberg emphasized that acrylic resin treatment protheses should be supervised constantly (147). He remarked that severe occlusal mutilation can result if a patient wears an acrylic resin treatment prosthesis for extended periods of time.

In contrast, though, Ramfjord and Ash have stated, "by far the best appliance for patients with dysfunctional symptoms is the occlusal splint, which covers all of the teeth either in the maxilla or mandible. If the splint is made from casts mounted on an articulator and the acrylic is heat-cured, it is fairly easy to fit the splint in the mouth. The complete coverage splint can be used for any length of time since it does not allow the teeth to move" (115).

Removable acrylic resin orthoses of various designs have been used extensively for research (11,13,15,22,25,33,36,51,54,

91,96,108,110,120,122,133,155), prosthetic rehabilitation (75,82,93,98,121,145,146,148-150,152), and intraoral protection (34,64,73,89,102,138,156). These appliances are widely recommended in dentistry and medicine even though they are empirical in design and fabrication method. Still, no definitive study has been made to evaluate the dimensional stability provided by different fabrication techniques and storage methods.

C. Dimensional Stability Research

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The analysis of the dimensional stability of acrylic resins has been well documented in the literature. Since the introduction of acrylic resin denture base material in 1937, investigators have used a variety of methods to determine the dimensional change during processing and storage, and the subsequent fit of dentures.

In 1939, Sweeney studied the effect of change in environment on warpage of a denture made from acrylic resin (140). He fabricated dentures and replaced them on stone models after fifteen days storage at 37°C. The amount of space between the denture and the stone model indicated the fit. Sweeney also devised a stainless steel alloy shrinkage test block and a pyrex glass plate with etched lines to determine percent shrinkage of denture base materials during curing.

Sweeney, Paffenberger, and Beall reported in 1942 on the physical, chemical, and mechanical properties of thirty acrylic resins (141). In order to study the dimensional change that took

place during alternate wetting and drying, they placed gauge marks on each processed denture just posterior to the last teeth. The distance between the gauge marks was measured with a micrometer microscope after each denture was placed on a gypsum model and repeatedly wetted and dried. In general, the dentures increased in dimension on immersion and decreased in dimension on drying.

Sweeney et al also utilized stainless steel dies to determine linear shrinkage during curing 141. Acrylic resin forms were molded on the stainless steel die, which at certain points had fine cross-line reference marks. These marks were transferred to the resin forms during molding. The difference in distance between the reference marks on the die and resin forms represented the shrinkage of the acrylic resin during processing.

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In 1943, Skinner and Cooper processed acrylic resins directly against special brass models in order to eliminate any variables contingent upon the stability of a stone cast (130). The metal models represented diagrammatically the posterior section of an upper edentulous mouth. They observed at least two dimensional changes which are unavoidably active in every acrylic resin denture; namely, shrinkage, which occurs during processing, and, subsequently, expansion, which occurs upon immersion in water.

Caul and Schoonover described in 1949 a chemical method for determining the degree or completeness of polymerization of acrylic resins used for dentures (24). They applied their method

to the investigation of irregularly shaped objects which they felt cannot be tested by conventional methods. The authors concluded that lower transverse strength of thin sections of dentures, as compared to thick sections, was the result of less complete polymerization in the thin sections.

One of the advantages of the self-curing resins for the construction of denture bases was assumed to be accuracy of fit. All observations on this subject appeared to be somewhat qualitative and subjective with the exception of those made in 1952 by McCracken (92). He found by measurement that the linear curing shrinkage of the self-curing acrylic resins was less than that for the heat-curing resins, and that the shrinkage was compensated for after a five-day immersion in water.

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Also in 1952, Grunewald, Paffenberger, and Dickson utilized a stainless steel die to stimulate the shape of the denture bearing surface of an edentulous jaw to study the effect of molding processes on denture resin (58). Reference marks (A,B,C,D,E,F) were ruled at varying points along the posterior section of the die. These marks were transferred from the die to the acrylic resin form during curing. The difference between the two most lateral marks (A,F) on the die and on the denture form was used as a measure of the linear shrinkage which occurred during processing. The greatest change in dimension occurred on removal of the denture from the model.

With McCracken's previous observations in mind, Skinner and Jones investigated in 1955 the dimensional stability of

self-curing denture base acrylic resins (131). The master model used throughout this study was an edentulous maxillary reproduction, cast in aluminum with no undercuts. Gauge marks were cut on the casts in the posterior ridge area. The distances between the gauge marks were measured, and compared with the distances between their impressions in the denture bases and dentures constructed. The percentage of difference between the gauge marks on the casts and those in the resin was assumed to be a measure of the accuracy of fit in these regions.

Skinner and Jones concluded that the curing shrinkage of the denture bases made with self-curing acrylic resin was definitely less than that of bases constructed with the heat-curing resin (131). They also noted that when the self-cured denture base was allowed to remain in air, a further shrinkage occurred, presumably the result of a further polymerization of the resin. Immersion of the denture bases in water at 37°C resulted in a gradual increase in size in all instances. After an immersion of six weeks, the self-cured denture bases were approximately as much oversize as the heat-cured bases were undersize.

In 1958, Mowery et al reported on the dimensional stability of denture base resins (100). Measurements of the dimensional changes during processing and during a period of two years of clinical service were made on a series of dentures. To provide reference points for determination of dimensional changes, stainless steel pins, polished on one end and ruled with fine cross marks, were cemented in the central fossa of the last

molars (A,B) and in the distobuccal peripheral flanges (C,D) of the self-cured and heat-cured acrylic resin dentures. All measurements were made at 70° F on a toolmaker's microscope and recorded to the nearest 0.000l inch. The researchers computed and graphed the percentage change in dimension between the reference points. Readings were made on the waxed-up model prior to processing; after removal from the cast on the denture just prior to insertion; at 30-day intervals for six months after delivery to the patient; and then at six-month intervals.

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Anthony and Peyton, in 1959, evaluated the dimensional accuracy of denture bases with a modified comparator (5). For this study, a method was developed using a modified comparator for reproducing denture contours in their relation to a master model in such a manner that the discrepancies at any point may be measured as the shortest distance between the contour lines. The comparator is essentially a pantograph which measure the vertical distance between corresponding points on the surfaces of two similar objects.

The dimensional changes occurring in dentures during processing were investigated in 1960 by Woelfel, Paffenberger, and Sweeney (153). They measured vertical discrepancies in occlusal relations of dentures processed with different acrylic resin denture materials. They also made linear measurements on each denture (molar-to-molar) at various times at 72° F. The reference marks were fine cross lines ruled on polished stainless steel pins cemented in the second molars and in buccal flange

borders of mandibular dentures. The relative deformation (distortion) of the posterior section of the dentures was judged by the molar to molar and flange to flange shrinkage.

Woelfel determined the relative accuracy of the fit of the dentures in this study (153) by: 1) comparing the position of the incisal guide pin before and after curing; 2) measuring molar to molar shrinkage from the wax model denture to the polished denture; 3) examining crossections of cured dentures surrounded by the flasking gypsum; 4) noting the fit of polished dentures on the casts on which they were cured; and 5) observing the relative fit of the dentures in the mouth.

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following year, the same investigators studied changes in dentures during storage in water and in service (154). They developed a warpage index for this report and defined it as the difference in percentage change between the molar-to-molar and the flange-to-flange distances. For example, if a expanded or shrank proportionally over the molar-to-molar and the flange-to-flange distances, its warpage index would be zero. However, if it expanded molar to molar and shrank flange flange, or if the shrinkage or expansion over the two distances was greatly out of proportion, the warpage index would relatively high. In this study, the warpage index ranged from 0.00 to 0.61 percent. The researchers also compared the relation between the fit of the clinical dentures on the gypsum cast which they were cured and the changes in molar-to-molar flange-to-flange distances.

Anthony and Peyton, in 1962, evaluated the accuracy and fit of dentures made of various materials utilizing their modified comparator for measuring denture contours (6). They found the most accurately fitting dentures to be of the self-curing acrylic resin type. The authors attributed this to the fewer processing strains which result from low curing temperatures. Heat-cured dentures of different brands did not fit as well as self-cured ones, but, nonetheless, were considered good.

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The following year, Peyton and Anthony evaluated dentures processed by different techniques (111). They determined by means of a modified comparator the exactness of the duplication of dentures from the final impression and the accuracy of fit of dentures made of various materials. The authors concluded that the most accurate dentures were invariably of the self-curing type. In general, it was determined that the self-curing method of processing offered the simplest method and involved the least amount of equipment. Self-curing materials should especially find application for repairs and relining, since the application of heat causes warpage of plastic dentures.

In 1967, Smith, Lord, and Bolender reported on complete denture relines processed with autopolymerizing acrylic resin in water under pressure (132). They evaluated the dimensional accuracy of this reline technique. A metal die shaped to simulate a maxillary arch was used as a standard. It was semicircular in shape with a diameter of 6.7 cm. The buccal and palatal tapers were equal. The investigators measured the space

in inches between the relined samples and the die. The results obtained showed a significant difference between the auto-polymerizing 100° F relines and the heat-cured relines. The authors concluded that processing in water under compressed air produced relines which were dimensionally more accurate than heat-cured relines.

In more recent times, Craig (32) has recommended that autopolymerizing acrylic resins should be processed in water under pressure. He also has suggested several curing methods to improve the "quality" of acrylic resin restorations and prostheses.

Stafford, Bates, and Huggett, in 1983, reported on the dimensional accuracy of orthodontic base polymers (135). Seven orthodontic base resins were examined and compared with a conventional heat-cured resin, a high-impact rubber-added resin, a dough-molded autopolymerizing resin, and a pour-type resin. The orthodontic resin specimens were produced using "infiltration" technique, more commonly referred to as the sprinkle-on additive technique. The dimensional accuracy of the orthodontic resin materials was measured using the method of Goodkind and Shulte (50). A modified master metal die was made so as to approximate more closely the tooth-coverage limits removable orthodontic appliances. The dimensional accuracy the materials tested was reported to be good. The amount of "contraction" in all cases was less than 0.6 percent. saturation in water for one month the expected expansion took

place, and this was very apparent at the posterior dimension. However, the orthodontic resin bases were in all cases within one percent of the original dimension of the stone cast.

In 1985, O'Toole, Furnish, and vonFraunhofer investigated the effect of five polymerizing methods on the dimensional stability of cold-curing acrylic resin (106). The authors evaluated the same curing methods as reported in their 1983 transverse strength study (41); namely, 1) bench polymerization, 2) curing under a coating of petroleum jelly, 3) curing in a monomer atmosphere, 4) polymerization under pressure in air, and 5) curing under air pressure in water. The linear distortions of acrylic resin block specimens formed by a one-stage sprinkle-on measured differences technique were and between means statistically evaluated.

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The researchers in this study (106) concluded that there was a tendency for specimens cured under air and water pressure to exhibit greater linear dimensional change, i.e. greater distortion, than specimens cured on the bench, in a monomer atmosphere, or coated with petroleum jelly.

Fehling, Hesby, and Pelleu reported in 1986 on the dimensional stability of autopolymerizing acrylic resin impression trays (39). Two commonly used methyl methacrylate autopolymerizing tray resins were evaluated. All trays were made on a custom ground aluminum tray former. Linear dimensional changes were recorded periodically between five reference pins that were transferred from the master die to the trays.

Reference pins (A,B,C,D,D') were located on the borders of five flange sites.

In this study (39), significant linear dimensional changes were observed for only 40 minutes from the initiation of tray fabrication. The authors concluded that while an aged tray (more than 24 hours) may be preferred, it is acceptable to make an impression in an autopolymerizing resin custom impression tray after 40 minutes.

Most recently in 1986, Ogle, Sorensen, and Lewis evaluated Triad Visible Light Curing (VLC) resin as a denture base reline material in comparison to heat-cured (HC) and autopolymerizing (AP) acrylic resin denture base reline materials (104). They used an edentulous maxillary dental stone cast with metal markers at five posterior palatal locations to measure dimensional stability. Each stainless steel pin was imprinted with a Rockwell Brale Diamond Penetrator and cemented in a prepared channel with epoxy cement.

Dimensional changes of the denture bases were evaluated by fabricating VLC, HC, and AP bases on identical casts. Horizontal measurements between pins, and vertical measurements (palatal lift), were recorded under dry conditions and after the bases had been soaked in water for 10 days. After 10 days in water, the AP acrylic resin showed a +0.05% expansion from ridge crest to ridge crest, VLC showed a -0.14% contraction and HC acrylic resin showed a -0.40% contraction. The authors concluded that visibile light-cured acrylic resin is "generally superior in fit compared

to heat-cured and autopolymerizing acrylic resin denture base reline materials" (104).

In retrospect, the basis for this research project is the fact that since the introduction of acrylic resin denture base material in 1937, there have been many suggested variations in fabrication techniques and storage methods for these materials. Often these variations have been introduced with a claim of superior properties, improved accuracy of fit, and greater dimensional stability in service. The full significance of these empirical claims on the function and performance of an orthosis in service has not always been clear.

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Because of the advantages claimed for the various acrylic resin materials and the modified fabrication techniques that have been introduced in the literature over the years, an evaluation of their effect on dimensional stability should be considered desirable at this time.

III. RESEARCH OBJECTIVES

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Removable acrylic resin orthoses have been used extensively dental practitioners in the diagnosis and treatment dentofacial disorders. These appliances allow for a decrease muscle fatigue, spasm, tenderness, joint edema, inflammation, tooth mobility, sensitivity, and a tendency to diminish However, the effects of orthoses eliminate bruxism (143). dental structures have not been completely understood, and the treatment has often led to failure (20.147). For this reason. widely varying opinions exist among clinicians and researchers concerning the design and construction o f interocclusal stabilization appliances.

The primary objective of this investigation is to construct removable acrylic resin specimens, utilizing various fabrication techniques for orthoses described in the literature, and to visualize and quantify their linear dimensional change, with a measuring microscope.

An original research model has been designed and will provide for analyzing the dimensional stability produced by five different fabrication techniques and two different storage methods. The validity of this type of investigation depends on the relationship between the model and the original structure it represents. Although the linear dimensional change to be observed should be predictable based on previous research, this study hopes to determine the effects of fabrication techniques

and storage methods on the dimensional stability of acrylic resin orthoses.

IV. METHODS AND MATERIALS

A. Design of Research Model

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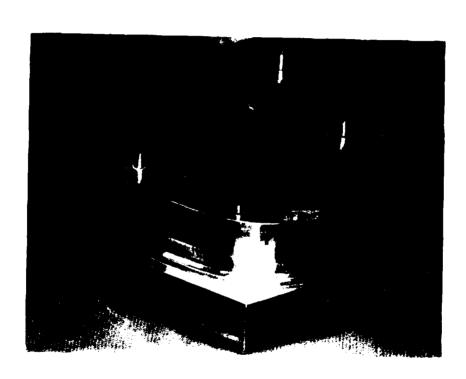
A computer designed and machined master aluminum die was fabricated to serve as an original research model for this investigation. The aluminum die was designed and constructed utilizing the average dimensions, reported in a study on athletic mouthguards (78), for a human dentate arch (see Plate 1).

An average arch length of 130 mm and an average arch height of 18 mm was proposed for the research model. An 11 mm arch width at the second molar, a 7.5 mm arch width at the canine, and a 3 mm arch width at the anterior midline were also incorporated into the design. In addition, a 5 degree buccal taper and a 7 degree lingual taper were selected for the research model. Finally, two millimeter diameter cylindrical depressions at the second molar and canine areas were placed to provide intra-arch distances between the depressions of approximately 35, 50, and 25 millimeters.

An engineering drawing containing the desired dimensions was completed by Dr. Kirk Satrom, Dental Investigative Service, Brooks AFB, Texas. Verbal discussions were held with Mr. McDougall, Supervisor, Materials Laboratory, Brooks AFB, Texas and Mr. Heinz Jaeger, Machinist, Materials Laboratory, Brooks AFB, Texas for the computer design and fabrication of the original research model. Mock-up models of wood and plastic were

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Plate 1. Computer designed and machined aluminum research model with paralleled brass Pindex pins.



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made by Heinz Jaeger prior to final fabrication of the aluminum research model.

The mock-up models were an invaluable aid as several changes to the original design were necessary. In particular, the lingual surface of the arch was given a 7 degree taper instead of 15 degree, and was shortened in height from 18 mm to 13 mm. Also, locations of the anterior cylindrical depressions were moved approximately 5 mm distally from their original locations.

Numerous photographs were made documenting the sequential sculpting of the research model from a block of aluminum by a computer programmed milling machine.

B. Fabrication of Research Casts

Following fabrication of the research model, a surveyor utilized to parallel placement of Pindex brass pins (long) the cylindrical depressions. Polyvinylsiloxane impression material was used to secure the pins in centered and paralleled positions. The long Pindex pins were replaced with short brass pins. The entire research model was placed duplicating flask and impressed with irreversible hydrocolloid (56 grams) mixed with 350 cc distilled water. The irreversible hydrocolloid was vacuum mixed with distilled water for 45 seconds t. produce a smooth, runny, bubble-free mixture for duplication. The impression material was allowed to set for five minutes.

After removal of the aluminum research model from the irreversible hydrocolloid impression in the duplicating flask,

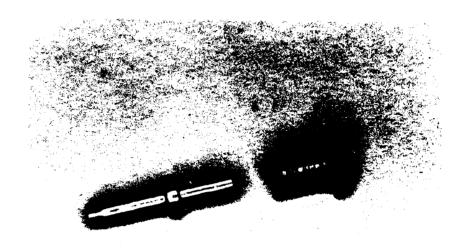
Pindex brass pins (short) and altered grey plastic sleeves were placed into the depressions in the impression. The grey plastic Pindex sleeves were altered by shortening their length to coincide with the longest end of the short Pindex brass pins. Each plastic sleeve was then removed and replaced on its accompanying brass pin in a reversed position (see Plate 2). This allowed for the grey plastic sleeve to be securely retained in the fabricated stone cast.

To complete the fabrication of each research cast, one hundred fifty grams of Die-Keen improved dental stone (Modern Materials, Columbus Dental) was combined with thirty-five cc of distilled water and vacuum-mixed at 1725 rpm for thirty seconds under 710 mm mercury vacuum using a Vac-U-Mix Combination Unit Vacuum Mixer (Whip-Mix Corporation, Louisville, Kentucky). Following placement of the four Pindex pins and attached grey plastic sleeves into the depressions in the impression in the duplicating flask, the Die-Keen improved dental stone mixture was vibrated into the impression with the use of a Toothmaster Invescment Vibrator, Whaledent International. The dental scone was allowed to set for one hour at which time the completed research cast was withdrawn from the impression material.

After complete drying of the research casts, each embedded pindex pin was removed, cleaned, and inverted to provide a metal flange approximately 1.0-1.5 mm above the stone cast surface. The metal flange would serve as a retentive undercut-locking mechanism for each pindex pin during fabrication of the acrylic

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Plate 2. Grey plastic sleeve modified for insertion onto brass Pindex pin. Plastic sleeve will be retained in die-stone research cast.



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resin specimen. Prior to inverting each pindex pin, an abrasive disk was used to place vertical grooves in the metal flange to serve as anti-rotational locking mechanisms (see Plates 3 and 4).

Each cast was labeled with a capital letter, a number, and a lower case letter to respectively designate the design, specimen number, and method of storage. For example, the first five casts were labeled: A-1(w), A-2(d), A-3(w), A-4(d), and A-5(w).

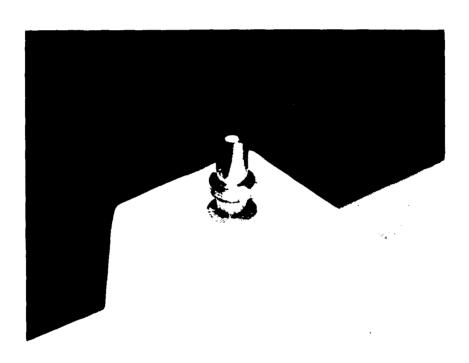
C. Fabrication of Specimens

Five specific design and fabrication techniques, representative of those reported in the literature, were utilized to construct fifty removable acrylic resin orthotic specimens. Ten specimens were fabricated on individual die-stone casts for each of the five fabrication techniques. All acrylic resin specimens were produced in the same laboratory using standardized conditions and materials.

The outline, thickness, and overall dimensions of all specimens were made to approximate each other, not only within each design set, but also among all of the designs. The design of each specimen ensured coverage of the lingual and occlusal surfaces (2-3 mm thick) and 2-3 mm of the buccal surfaces of the research cast arch form.

The five fabrication techniques consisted of a one-stage sprinkle-on autopolymerizing acrylic resin application technique (Design A), a three-stage sprinkle-on autopolymerizing acrylic resin application technique (Design B), an autopolymerizing

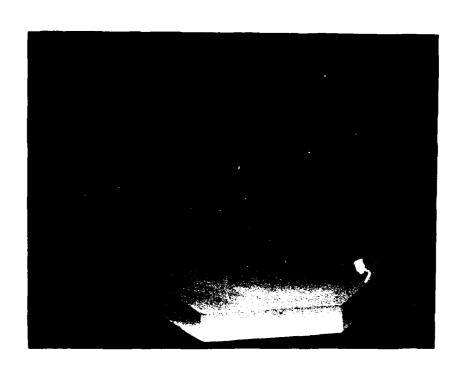
Plate 3. Brass Pindex pin inverted in die-stone research Vertical grooves and metal flange provide for anti-rotational and mechanical lock of pin to specimen.



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Plate 4. Die-stone research cast with designated pin locations A, B, C, and D. Outline form for specimen indicated by pencil line.





acrylic resin dough application technique (Design C), a vacuum-adapted resin sheet and autopolymerizing acrylic resin dough application technique (Design D), and a heat-cured acrylic resin denture processing technique (Design E).

Design A consisted of a one-stage sprinkle-on technique autopolymerizing orthodontic acrylic resin (Caulk Orthodontic Autopolymerizing Clear Acrylic Resin). Wax-up of the border outline of each specimen was accomplished using pink baseplate wax (Hygienic Type II medium wax). Two layers of Al-Cote (tin foil substitute) separating medium were applied to the buccal. occlusal, and lingual surfaces of each die-stone research cast. Autopolymerizing orthodontic acrylic resin (monomer and polymer) was sprinkled on to the buccal, occlusal, and lingual surfaces of each cast, with a sprinkle-on additive technique, from second molar area circumferentially around the arch to the opposite second molar area. Each completed specimen of Design A was allowed to complete polymerization in air on a laboratory benchtop for a minimum of 60 minutes.

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Design B consisted of a three-stage sprinkle-on technique of autopolymerizing orthodontic acrylic resin (Caulk Orthodontic Autopolymerizing Clear Acrylic Resin). Wax-up of 'the border outline of each specimen was accomplished using pink baseplate wax (Hygienic Type II medium wax). Two layers of Al-Cote (tin foil substitute) separating medium were applied to the buccal, occlusal, and lingual surfaces of each die-stone research cast. Autopolymerizing orthodontic clear acrylic resin (monomer and

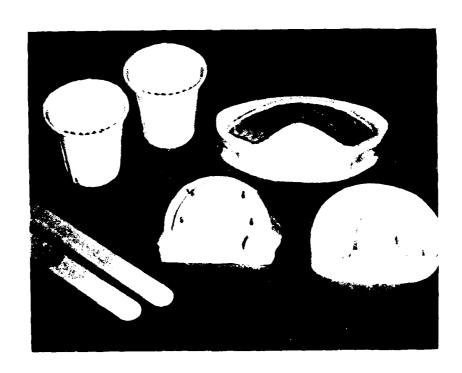
polymer) was sprinkled on to the buccal, occlusal, and lingual surfaces of each cast, with a salt-and-pepper additive technique, in three separate sections. Each section (two posterior and on anterior) was allowed to polymerize in air on a laboratory benchtop for twenty minutes before proceeding to the next section. The right posterior section was formed first (reference pin D included in this section), then the left posterior section (reference pins A and C included in this section), and finally, the two posterior sections were connected by forming the anterior section (reference pin B included in this section). Thus, each completed specimen of Design B was fabricated based on the addition of separate sections of acrylic resin to the research cast.

Design C consisted of autopolymerizing acrylic resin (Caulk Orthodontic Autopolymerizing Clear Acrylic Resin) mixed into a dough and manually adapted over the research stone cast. Two layers of Al-Cote (tin foil substitute) separating medium were applied to the buccal, occlusal, and lingual surfaces of each die-stone research cast. A powder to liquid ratio of 2:1 using 16 cc of polymer and 8 cc of monomer, measured in graduated cylinders, provided an adequate amount of acrylic resin dough for each specimen.

A Die-Keen stone mold was developed for shaping the acrylic resin dough prior to application of the dough to individual research casts (see Plate 5). The stone mold was approximately 3 mm in depth with four cylindrical elevations to aid in placement

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- Plate 5. Armamentarium developed for fabrication of Design C and Design D specimens.
 - Die-Keen stone mold to shape acrylic resin dough.
 - 2. Polyvinylsiloxane mold on research cast.
 - Die-Keen stone cap to maintain appropriate outline form and thickness.



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of the dough onto the casts so as not to disturb the pindex pins. In the non-tacky handling stage, the dough demonstrated a rubbery, springy consistency and a stone cap was used to shape the dough and maintain an appropriate outline form and thickness during fabrication of each specimen.

A small amount of autopolymerizing acrylic resin was mixed and placed in a "runny" consistency around the pindex pins of each research cast to enhance the mechanical lock of the fabricated specimen to the pins. This "runny" mixture was placed on the cast immediately prior to the application of the acrylic resin dough. Each completed specimen of Design C was allowed to bench cure under normal atmospheric conditions.

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Design D consisted of a clear .060" Omnivac resin (Buffalo Lental Co.) adapted over a research cast autopolymerizing acrylic resin (Jet Clear Autopolymerizing Acrylic Resin, Lang Mfg.) mixed into a dough and manually placed over the Omnivac resin sheet. Two layers of Al-cote (tin substitute) separating medium were applied to the buccal. occlusal, and lingual surfaces of each die-stone research cast. A .060" clear resin sheet was vacuum-adapted over each cast. resin sheet was trimmed with a straight acrylic bur appropriate outline and dimensions marked in blue pencil on cast. A powder to liquid ratio of 2:1 using 12 cc of polymer and 6 cc of monomer, measured in graduated cylinders, provided adequate amount of acrylic resin dough for each specimen.

A Die-Keen stone mold was developed for shaping the acrylic resin dough prior to application of the dough to the vacuum-adapted resin sheet on the individual research cast. The stone mold was approximately 3 mm in depth with four cylindrical elevations to aid in placement of the dough onto the resin sheet so as not to disturb the pindex pins. In the non-tacky handling stage, the dough demonstrated a rubbery, springy consistency and a stone cap was used to shape the dough and maintain an appropriate outline form and thickness during fabrication of each specimen.

A small amount of autopolymerizing acrylic resin was mixed and placed in a "runny" consistency around the pindex pins and on the buccal, occlusal, and lingual surfaces of the resin sheet. This application enhanced the mechanical lock of the specimen to the pins and the chemical retention of the resin sheet to the acrylic resin dough. The entire cast and affixed, fabricated specimen was placed in a pressure pot and allowed to cure at 100° F for 15 minutes at 20 p.s.i. pressure.

Design E consists of two thicknesses of baseplate wax (Hygienic Type II Hard Wax) adapted over a research cast and duplicated in clear heat-curing acrylic resin (Plastodent) following standard laboratory procedures for processing complete dentures. Each die-stone research cast was waxed to the appropriate outline and dimensions as marked in blue pencil on each cast. The completed wax-up and cast were invested using Type II yellow dental stone and flasked in a maxillary denture

flask in three stages (drag, cope, and cap). Prior to investing the cap portion of the flask, polyvinylsiloxane impression material (Reprosil Light Body) was placed over each of the four pindex pins protruding from the wax-up (see Plate 6). This elastomeric impression material allowed for separation of the flask during packing and divestment without dislodgement of the pindex pins.

Flasks containing the invested wax-ups for specimens were placed in a boil-out tank for seven minutes. The flasks were opened and wax residue removed by flushing with hot water. Wax solvent was placed on the casts and all invested stone parts were again flushed thoroughly with hot water. A diluted detergent and water solution was placed on the casts and thoroughly flushed with hot water. Each invested stone portion of the denture flask was allowed to bench cool and dry to room temperature, then painted with two layers of Al-Cote separating medium (tin foil substitute).

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Heat-curing clear acrylic resin (Plastodent) was supplied in the form of a powder and a liquid. Twenty (20) grams of polymer was added to ten (10) milliliters of monomer in a porcelain jar and stirred for thirty (30) seconds. The jar was covered and allowed to stand until a soft putty-like consistency was obtained, in approximately 7-10 minutes, with no stickness evident. The temperature of the flask corresponded to that of room temperature (23 $^{\circ}$ C). A doughy roll of material was carefully placed into the cavity of the flask to avoid

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Plate 6. Die-stone research cast waxed to appropriate outline and thickness for fabrication of Design E specimen.

Elastomeric impression material protects pindex pins during flasking, packing, and divestment.

overpacking. The flask was closed and placed in a press. The press was closed very slowly, making half turns in the process, and taking approximately half a minute each turn. The complete procedure took 2-3 minutes. The flask was then allowed to stand for a few minutes as the material flowed into position. The flask was opened and it was ascertained if it had been packed sufficiently. Acrylic resin dough material was trimmed away at the edges of the specimen or added to deficient areas; the flask was then placed in the press and final closure was completed.

The packed flasks were allowed to bench set for 30 minutes and then placed in room temperature water in a Hanau curing unit. The flasks were heated for 90 minutes at 73° C followed by 30 minutes at 100° C. The flasks were removed from the curing unit after cooling of the water to room temperature. The flasks were divested and the acrylic resin specimens affixed to their casts were recovered intact (see Plate 7).

D. Storage of Specimens

After construction, initial measurement, and removal from their individual die-stone research cast, each specimen was stored in either a wet or dry environment for the duration of the study. Fifty percent (50%) of the available specimens from each design group were selected and stored in water at room temperature (wet storage condition). The remaining specimens were stored in air at room temperature (dry storage condition).

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Plate 7. Design E specimen representative of the appropriate outline form and thickness obtained for all removable acrylic resin specimens.



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To facilitate storage in water or air at room temperature, Zip-Lock storage bags were labeled with the design, specimen number, and method of storage (see Plate 8). For example, the first ten specimens were labeled: A-1(w), A-2(d), A-3(w), A-4(d), A-5(w), A-6(d), A-7(w), A-8(d), A-9(w), and A-10(d).

After initial measurement, each acrylic resin specimen was removed from its individual die-stone research cast and placed in its respective storage bag, designated either wet storage condition (w) or dry storage condition (d). A two-inch cotton roll was placed in a graduated cylinder containing 10 cc of distilled water. The moistened cotton roll and the remaining unabsorbed distilled water were placed into the wet storage bags to provide the wet storage condition. The dry storage bags contained only their acrylic resin specimens.

E. Measurement of Casts and Specimens

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As a method to determine the dimensional stability of removable acrylic resin orthoses, the distances between the inside diameters of the four pindex pins were measured with a linear measuring microscope (Gaertner Scientific Corp., Chicago, Ill.). These distances were labeled A-B, C-D, A-C, and B-D and respectively designated anterior, posterior, left, and right reference lines (see Plate 4).

Baseline measurements were made of the distances between the edges of the pins at their nearest points to each other and recorded at the following time periods:

Plate 8. Zip-lock storage bags labeled with design, specimen number, and storage condition (wet or dry).



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INITIAL MEASUREMENT, on die-stone research cast;
ON CAST, after fabrication of specimen;
O HOURS, specimen off cast;
24 HOURS, specimen stored wet or dry;
72 HOURS, specimen stored wet or dry;
TWO WEEKS, specimen stored wet or dry.

Initial measurements for Design D research casts were made with the .060" clear resin sheet vacuum-adapted to each cast. Initial measurements for Design E research casts were made with two thicknesses of baseplate wax adapted to each cast.

All measurements were made by the same investigator with the linear measuring microscope in the Biomaterials Research Laboratory, UTHSC at San Antonio Dental School. Investigator accuracy was determined to be + or - 0.003 millimeters by making ten measurements of an object with a known length.

The following protocol was established for setting up the Gaertner linear measuring microscope for each series of measurements:

- adjust heighth of traveling stage to predesignated mark.
- 2) adjust eyepiece to mid-range focus,
- 3) use level to orient traveling stage horizontally,
- 4) turn lamp to 6.75 illumination intensity.

The following protocol was established for alignment of the individual casts and specimens for each series of measurements:

- utilize glass slab for base to be moved about on fixed stage,
- place three spheres of Ti-cene clay in tripod design on glass slab,
- undersurface of cast and/or specimen tripoded on spheres of Ti-cene clay,
- 4) orient tops of pindex pins to flat metal disk in paralleling device (B & R instrument),
- 5) use level to check horizontal orientation,
- 6) glass slab with tripoded cast and/or specimen taken to measuring microscope for measurements (see Plate 9).

Record keeping procedures for data collection consisted of tables listing the design, specimen number, storage method, distance measured, and time intervals. All measurements made with the Gaertner linear measuring microscope were recorded to the nearest 0.001 millimeter.

F. Experimental Design and Statistical Analysis

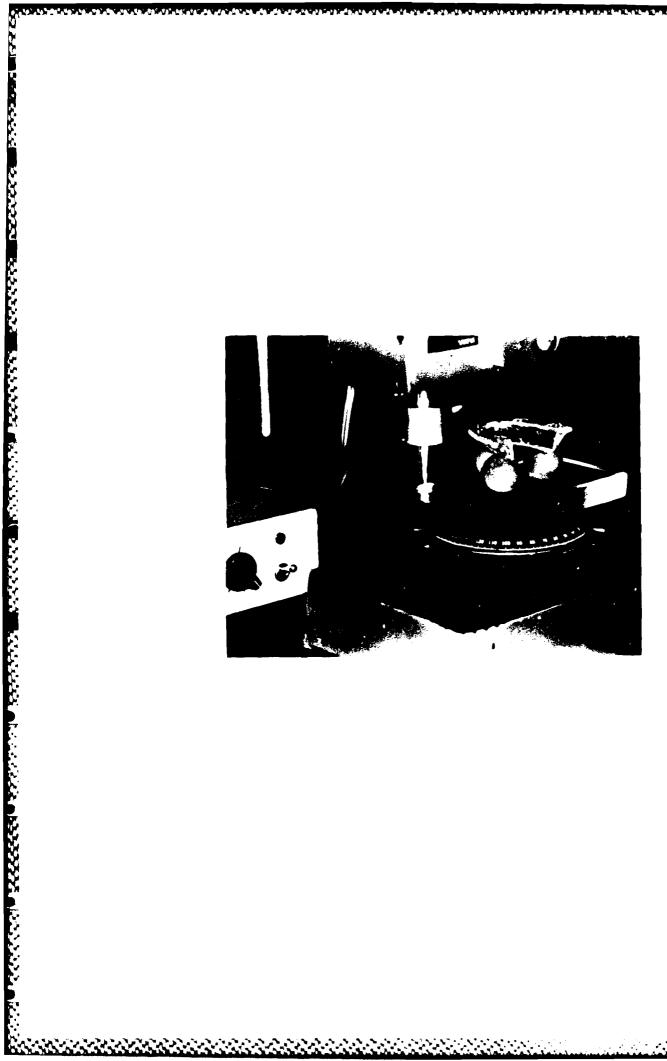
Experimental Design

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A four factor repeated measures experimental design was utilized for the present study. Factor 1, a random factor, was the fabrication techniques for specimens and contained five levels. Level 1 consisted of a one stage sprinkle-on technique (Design A). Level 2 consisted of a three stage sprinkle-on technique (Design B). Level 3 consisted of a dough application

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Plate 9. Specimen tripoded on glass slab with spheres of Ti-cene clay for each series of measurements.



technique (Design C). Level 4 consisted of a vacuum-adapted resin sheet and dough application technique (Design D). Level 5 consisted of a wax-up and heat-cured technique (Design E). Factor 2, a random factor, was the storage methods for specimens and contained two levels. Level 1 consisted of a wet storage condition (Wet). Level 2 consisted of a dry storage condition Factor 3, a random factor, was the locations of the (Dry). measurements for specimens and contained four levels. Level 1 consisted of the location between reference points A and (Location A-B). Level 2 consisted of the location between reference points C and D (Location C-D). Level 3 consisted of the location between reference points A and C (Location A-C). Level 4 consisted of the location between reference points B and D (Location B-D). Factor 4, a repeated factor, was the assessment time periods for the specimens and contained levels. Level 1 consisted of the on cast measurement minus the initial measurement (Time 1). Level 2 consisted of the zero hour measurement minus the initial measurement (Time 2). Level 3 consisted of the 24 hour measurement minus the initial measurement (Time 3). Level 4 consisted of the 72 hour measurement minus the initial measurement (Time 4). Level 5 consisted of the two week measurement minus the initial measurement (Time 5).

The dependent measure was linear dimensional change as measured by subtracting the initial measurement from the measurement at each time period.

Statistical Analysis

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A four factor repeated measures analysis of variance was used to calculate the overall F-ratio. In the case of significant interactions, appropriate tests of simple main effects using two way and single factor partitioning of variance were performed. All multiple pairwise comparisons were assessed using the Scheffe F-ratio test. The level of significance was established at .05.

V. RESULTS

The means and standard deviations of cumulative linear dimensional change across designs, conditions, locations, and time are summarized in Table 1. It can be seen that the mean cumulative linear dimensional change for all designs at Time 5 at location C-D appear greater than at locations A-B, A-C, and B-D, except for Design A under Dry Condition and Design E under Wet Condition. It can also be seen that the mean cumulative linear dimensional change for all designs at Time 5 at location A-B appear greater than at locations A-C and B-D, except for Designs A and C under Dry Condition and Designs A and B under Wet Condition.

It appears that the wet storage method resulted in less cumulative linear dimensional change for each design at each location at Time 5 than the dry storage method, except Design A at Location C-D (see Table 1).

It appears that the Design A fabrication technique provided for the least cumulative linear dimensional change over the measured time periods and that the Design D fabrication technique provided for the greatest cumulative linear dimensional change over the measured time periods (see Table 1).

The summary of the four factor repeated measures analysis of variance is listed in Table 2. It should be noted that the linear dimensional change significantly differed across the different designs (p < .001), as well as, across the storage

TABLE 1. STATISTICAL MEANS AND STANDARD DEVIATIONS OF CUMULATIVE LINEAR DIMENSIONAL CHANGE

All values are in millimeters (mm).

DRY CONDITION

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REPEATED MEASURES

	Time 1	Time 2	Time 3	Time 4	Time 5
Design A A-B C-D A-C B-D	002 (.017) 002 (.020) 029 (.030) 029 (.024)	050 (.090) 057 (.025) 062 (.030) 059 (.012)	040 (.022) 039 (.035) 078 (.024) 077 (.019)	057 (.023) 036 (.045) 085 (.029) 085 (.013)	069 (.034) 031 (.070) 105 (.027) 102 (.027)
Design B A-B C-D A-C B-D	013 (.022) 002 (.014) 025 (.014) 005 (.015)	069 (.025) 074 (.032) 056 (.010) 038 (.011)	087 (.021) 097 (.036) 076 (.010) 066 (.051)	106 (.028) 115 (.051) 091 (.013) 072 (.014)	127 (.034) 140 (.045) 102 (.013) 081 (.014)
Design C A-B C-D A-C B-D	059 (.075) 084 (.046) 153 (.038) 096 (.066)	148 (.060) 280 (.085) 168 (.040) 147 (.036)	151 (.056) 269 (.143) 179 (.038) 146 (.044)	160 (.062) 261 (.155) 183 (.042) 159 (.042)	153 (.056) 215 (.144) 188 (.042) 162 (.037)
Design D A-B C-D A-C B-D	145 (.049) 093 (.030) 160 (.047) 118 (.026)	214 (.062) 305 (.095) 162 (.039) 147 (.063)	246 (.072) 426 (.153) 166 (.041) 129 (.030)	266 (.090) 458 (.168) 175 (.042) 136 (.036)	278 (.093) 468 (.176) 184 (.043) 141 (.025)
Design E A-B C-D A-D B-D	061 (.080) 037 (.027) 107 (.039) 075 (.044)	152 (.085) 227 (.059) 100 (.031) 078 (.043)	162 (.090) 229 (.066) 107 (.027) 089 (.041)	168 (.085) 236 (.065) 124 (.029) 101 (.044)	196 (.080) 269 (.095) 51 (.027) 129 (.040)

TABLE 1 (con't). STATISTICAL MEANS AND STANDARD DEVIATIONS OF CUMULATIVE LINEAR DIMENSIONAL CHANGE

All values are in millimeters (mm).

WET CONDITION

REPEATED MEASURES

	Time 1	Time 2	Time 3	Time 4	Time 5
Design A A-B C-D A-C B-D	+.018 (.030) 007 (.012) 021 (.006) 038 (.014)	015 (.046) 066 (.029) 048 (.011) 068 (.016)	019 (.012) 032 (.076) 060 (.017) 069 (.006)	+.006 (.027) +.010 (.076) 046 (.006) 067 (.016)	+.043 (.025) +.097 (.075) 043 (.007) 063 (.012)
Design B A-B C-D A-C B-D	016 (.022) 016 (.014) 031 (.025) 013 (.017)	080 (.022) 115 (.045) 065 (.017) 040 (.014)	078 (.029) 144 (.067) 074 (.015) 051 (.018)	074 (.044) 138 (.074) 074 (.020) 045 (.020)	052 (.038) 074 (.056) 066 (.014) 042 (.015)
Design C A-B C-D A-C B-D	069 (.060) 039 (.052) 095 (.081) 086 (.043)	161 (.054) 239 (.053) 103 (.079) 101 (.033)	176 (.043) 323 (.051) 100 (.073) 098 (.036)	178 (.043) 341 (.055) 095 (.071) 100 (.034)	126 (.059) 182 (.090) 076 (.070) 076 (.031)
Design D A-B C-D A-C B-D	150 (.015) 075 (.022) 119 (.026) 105 (.025)	198 (.046) 242 (.085) 127 (.033) 112 (.038)	228 (.048) 378 (.119) 127 (.027) 106 (.033)	225 (.054) 430 (.118) 127 (.038) 100 (.024)	184 (.060) 352 (.101) 103 (.031) 087 (.030)
Design E A-B C-D A-C B-D	070 (.043) +.001 (.034) 054 (.072) 046 (.045)	156 (.033) 145 (.069) 063 (.060) 062 (.050)	164 (.031) 116 (.062) 065 (.063) 054 (.059)	163 (.036) 164 (.061) 067 (.063) 065 (.051)	145 (.036) 128 (.047) 059 (.065) 058 (.051)

TABLE 1 (con't). STATISTICAL MEANS AND STANDARD DEVIATIONS OF CUMULATIVE LINEAR DIMENSIONAL CHANGE

All values are in millimeters (mm).

ALL SPECIMENS

REPEATED MEASURES

	Time 1	Time 2	Time 3	Time 4	Time 5
Design A A-B C-D A-C B-D	+.010 (.024) 001 (.016) 025 (.021) 033 (.021)	032 (.036) 061 (.056) 055 (.023) 063 (.014)	030 (.020) 035 (.056) 069 (.022) 073 (.014)	026 (.041) 013 (.063) 066 (.029) 076 (.017)	013 (.065) +.033 (.096) 077 (.035) 083 (.023)
Design B A-B C-D A-C B-D	014 (.021) 009 (.015) 028 (.019) 009 (.016)	074 (.023) 095 (.043) 060 (.014) 039 (.012)	082 (.024) 121 (.056) 075 (.012) 054 (.013)	090 (.039) 126 (.061) 082 (.018) 058 (.022)	089 (.052) 107 (.059) 084 (.022) 061 (.025)
Design C A-B C-D A-C B-D	064 (.064) 061 (.052) 124 (.067) 091 (.053)	154 (.055) 260 (.070) 135 (.068) 124 (.040)	163 (.049) 296 (.105) 139 (.071) 122 (.045)	169 (.051) 301 (.117) 139 (.072) 129 (.048)	140 (.056) 198 (.115) 132 (.081) 119 (.056)
Design I A-B C-D A-C B-D	148 (.034) 084 (.026) 139 (.042) 111 (.025)	206 (.052) 273 (.091) 144 (.039) 129 (.052)	237 (.058) 402 (.132) 147 (.039) 117 (.033)	246 (.073) 444 (.138) 151 (.045) 118 (.035)	231 (.089) 410 (.149) 143 (.055) 114 (.039)
Design E A-B C-D A-C B-D	065 (.061) 018 (.035) 081 (.061) 061 (.045)	154 (.061) 186 (.074) 082 (.049) 070 (.045)	163 (.064) 197 (.069) 086 (.054) 072 (.051)	165 (.062) 200 (.070) 096 (.055) 083 (.049)	170 (.064) 198 (.103) 105 (.067) 093 (.057)

TABLE 2. SUMMARY TABLE FOR FOUR FACTOR REPEATED MEASURES ANALYSIS OF VARIANCE (ANOVA)

Source:	df:	SS:	MS:	F-test:	P-value:
DESIGN (A)	4	3.312	.828	67.376	.0001*
CONDITION (B)	1	.240	.240	19.541	.0001*
A x B	4	.045	.011	.912	.4587
LOCATION (C)	3	.872	.291	23.663	.0001*
A x C	12	1.129	.094	7.655	.0001*
ВхС	3	.018	.006	•491	.6888
A x B x C	12	.107	.009	.723	.7276
subjects with groups	160	1.966	.012		
TIME PERIODS (D)	4	.872	.218	355.377	.0001*
A x D	16	.155	.010	15.765	.0001*
Вх D	4	.130	.033	53.153	.0001*
A x B x D	16	.016	.001	1.599	.0638
Сх Д	760	.522	.044	70.953	.0001*
A x C x D	48	.483	.010	16.417	.0001*
ВхСхD	12	.025	.002	3.351	.0001*
A x B x C x D	48	.039	.001	1.315	.0800
D x subjects with groups	640	•393	.001		

^{*} denotes significance at p < .05

conditions (p < .001). In addition, there were significant differences in linear dimensional change across the different locations (p < .001), as well as, across the different time periods (p < .001). Due to significant interactions between design, location, and time (p < .001), condition, location, and time (p < .001), as well as, design and location (p < .001), design and time (p < .001), condition and time (p < .001), and location and time (p < .001), these significant effects are only important when considering them with respect to each other. Thus, simple main effects tests were performed. The summary of these analyses can be seen in Tables 3, 4, and 5.

Significant differences existed between design and location across each of the time periods at p < .05 (see Table 3). One-factor analyses of variances were performed to test for simple, simple main effects (see Table 4). Multiple pairwise comparisons of designs at each location at each time interval were analyzed. The summary of these multiple pairwise comparison analyses can be seen in Table 6. Statistically significant subsets (p < .05) are underlined and listed in order of increasing dimensional change, left to right.

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Multiple pairwise comparison analyses of each Design at Location A-B at Time 1 (On Cast - Initial Measurement) revealed that the linear dimensional change of Design A was significantly less than those of Designs C, D, and E (p < .05). Similar analysis revealed that the linear dimensional changes of Designs

TABLE 3. SUMMARY TABLE FOR SIMPLE MAIN EFFECTS OF DESIGN x LOCATION x TIME

(ANOVA Tables for 2-Factor Analysis of Variance)

Source:	df:	SS:	MS:	F-test:	P-value:
TIME 1 DESIGN (A) LOCATION (B) A x B Error	4 3 12 180	.05. .343 .036 .288	.017 .086 .003 .002	10.554 53.527 1.886	.0001* .0001* .0386*
TIME 2 DESIGN (A) LOCATION (B) A x B Error	4 3 12 180	•571 •244 •119 •435	.143 .081 .010 .002	58.996 33.552 4.109	.0001* .0001* .0001*
TIME 3 DESIGN (A) LOCATION (B) A x B Error	4 3 12 180	.796 .446 .382 .599	.199 .149 .032 .032	59.810 44.716 9.574	.0001* .0001* .0001*
TIME 4 DESIGN (A) LOCATION (B) A x B Error	4 3 12 180	.941 .461 .519	.235 .154 .043 .004	59.965 39.198 11.025	.0001* .0001* .0001*
TIME 5 DESIGN (A) LOCATION (B) A x B Error	4 3 12 180	.816 .193 .555 .949	.204 .064 .046 .005	38.674 12.180 8.777	.0001* .0001* .0001*

^{*} denotes significance at p < .05

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TABLE 4. SUMMARY TABLE FOR SIMPLE, SIMPLE MAIN EFFECTS OF DESIGN x LOCATION x TIME

(ANOVA Tables for One-Factor Analysis of Variance)

Source:	df:	SS:	MS:	F-test:	P-value:
TIME 1 DESIGN x LOC AB Between groups Within groups Total	4 45 49	.146 .090 .236	.037 .002	18.256 	.0001*
DESIGN x LOC CD Between groups Within groups Total	4 45 49	.052 .046 .098	.013 .001	12.832	.0001*
DESIGN x LOC AC Between groups Within groups Total	4 45 49	.112 .097 .209	.028 .002	12.882	.0001*
DESIGN x LOC BD Between groups Within groups Total	4 45 49	.069 .055 .125	.017	14.156 	.000.*
TIME 2 DESIGN x LOC AB Between groups Within groups Total	4 45 49	.193 .101 .294	.043 .002	21.466 	.0001*
DESIGN x LOC CD Between groups Within groups Total	4 45 49	.364 .191 .555	.091 .004	21.429 	.0001*
DESIGN x LOC AC Between groups Within groups Total	4 45 49	.071 .083 .154	.018 .002	9.531 	.0001*
DESIGN x LOC BD Between groups Within groups Total	4 45 49	.063 .060 .123	.016 .001	11.785 	.0001*

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TABLE 4 (con't). SUMMARY TABLE FOR SIMPLE, SIMPLE MAIN EFFECTS OF DESIGN x LOCATION x TIME

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(ANOVA Tables for One-Factor Analysis of Variance)

Source:	df:	SS:	MS:	F-test:	P-value:
TIME 3 DESIGN x LOC AB Between groups Within groups Total	4 45 49	.259 .098 .356	.065 .002	29 . 829 	.0001*
DESIGN x LOC CD Between groups Within groups Total	4 45 49	.829 .356 1.185	.207 .008	26.219 	.0001*
DESIGN x LOC AC Between groups Within groups Total	4 45 49	.054 .091 .145	.014 .002	6.712	.0003 [*]
DESIGN x LOC BD Between groups Within groups Total	4 45 49	.036 .055 .091	.009	7.430 	.0001*
TIME 4 DESIGN x LOC AB Between groups Within groups Total	4 45 49	.282 .135 .417	.071 .003	23.580 	•0001*
DESIGN x LOC CD Between groups Within groups Total	4 45 49	1.088 .409 1.497	.272 .009	29.971 	.0001*
DESIGN x LOC AC Between groups Within groups Total	4 45 49	.054 .103 .158	.014 .002	5.920	.0001*
DESIGN x LOC BD Between groups Within groups Total	4 45 49	.035 .060 .095	.009 .001	6.607 	.0001*

TABLE 4 (con't). SUMMARY TABLE FOR SIMPLE, SIMPLE MAIN EFFECTS OF DESIGN x LOCATION x TIME

(ANOVA Tables for One-Factor Analysis of Variance)

Source:	df:	SS:	MS:	F-test:	P-value:
TIME 5 DESIGN x LOC AB Between groups Within groups Total	4 45 49	.273 .199 .472	.068 .004	15.420 	.0001*
DESIGN x LOC CD Between groups Within groups Total	4 45 49	1.042 .526 1.568	.260 .012	22.284	.0001*
DESIGN x LOC AC Between groups Within groups Total	4 45 49	.034 .143 .176	.008 .003	2.666	.0443 [*]
DESIGN x LOC BD Between groups Within groups Total	4 45 49	.022 .081 .103	.006 .002	3.075 	•0254**

^{*} denotes significance at p < .05

TABLE 5. SUMMARY TABLE FOR SIMPLE MAIN EFFECTS OF CONDITION x LOCATION x TIME

(ANOVA Tables for 2-Factor Analysis of Variance)

Source:	df:	SS:	MS:	F-test:	P-value:
TIME 1 CONDITION (A) LOCATION (B) A x B Error	1 3 3 192	.009 .051 .008 .051	.009 .017 .003 .003	2.629 4.985 .743	.1066 .0024* .5276
TIME 2 CONDITION (A) LOCATION (B) A x B Error	1 3 3 192	.019 .244 .005 1.102	.019 .081 .002 .006	3.305 14.141 .267	.0706 .0001* .8494
TIME 3 CONDITION (A) LOCATION (B) A x B Error	1 3 3 192	.015 .446 .009 1.754	.015 .149 .003 .009	1.618 16.296 .345	.2049 .0001* .7930
TIME 4 CONDITION (A) LOCATION (B) A x B Error	1 3 3 192	.044 .461 .011 2.111	.044 .154 .004	3.969 13.986 .347	.0478* .0001* .7913
TIME 5 CONDITION (A) LOCATION (B) A x B Error	1 3 3 192	.284 .193 .010 2.026	.284 .064 .003	26.940 6.086 .308	.0001* .0006* .8198

^{*} denotes significance at p < .05

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TABLE 6. SUMMARY TABLE FOR MULTIPLE PAIRWISE COMPARISON ANALYSES OF DESIGN

REPEATED MEASURES

	Time 1	Time 2	Time 3	Time 4	Time 5
Location A-B	<u>A B</u> C E D	<u>ABCED</u>	<u>A B C E</u> D	<u>A B</u> C E D	<u>A B</u> C E D
Location C-D	<u>A B E C D</u>	ABECD	<u>A B E C D</u>	<u>A B</u> E C D	ABCED
Location A-C	<u>A B E</u> C D	<u>A B E C D</u>	ABECD	<u>A B E C</u> D	ABECD
Location B-D	BAECD	<u>B A E C D</u>	BEADC	BAEDC	<u>B A E D C</u>

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*Underline denotes statistically significant subsets listed in order of increasing dimensional change, left to right, at p < .05.

B, C, and E were significantly less than that of Design D (p < .05).

Multiple pairwise comparison analyses of each Design at Location C-D at Time 1 revealed that the linear dimensional changes of Design A and Design B were significantly less than those of Designs C and D (p < .05). Similar analysis revealed that the linear dimensional change of Design E was significantly less than that of Design D.

Multiple pairwise comparison analyses of each Design at Location A-C at Time 1 revealed that the linear dimensional changes of Design A and Design B were significantly less than those of Design C and D (p < .05).

Multiple pairwise comparison analyses of each Design at Location B-D at Time I revealed that the linear dimensional changes of Design A and Design B were significantly less than those of Designs C and D (p < .05). Similar analysis revealed that the linear dimensional change of Design B was significantly less than that of Design E (p < .05), and that Design E linear dimensional change was significantly less than that of Design D (p < .05).

Multiple pairwise comparison analyses of each Design at Location A-B at Time 2 (O Hour - Initial Measurement) revealed that the linear dimensional changes of Design A and Design B were significantly less than those of Designs C, D, and E (p < .05).

Multiple pairwise comparison analyses of each Design at Location C-D at Time 2 revealed that the linear dimensional

change of Design A was significantly less than those of Designs C, D, and E (p < .05). Similar analysis revealed that the linear dimensional change of Design B was significantly less than those of Designs C and D (p < .05).

Multiple pairwise comparison analyses of each design at Location A-C at Time 2 revealed that the linear dimensional changes of Design A and Design B were significantly less than those of Designs C and D (p < .05). Similar analysis revealed that the linear dimensional change of Design E was significantly less than Design D (p < .05).

Multiple pairwise comparison analyses of each design at Location B-D at Time 2 revealed that the linear dimensional changes of Design A and Design B were significantly less than those of Designs C and D (p < .05). Similar analysis revealed that the linear dimensional change of Design E was also significantly less than those of Designs C and D p . 5.

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Multiple pairwise comparison analyses of each design at Location C-D at Time 3 revealed that the linear dimensional change of Design A was significantly less than those of Designs

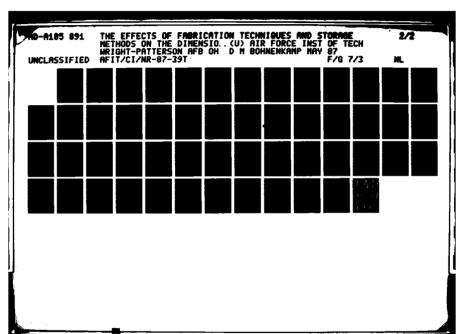
C, D and E (p < .05). Similar analysis revealed that the linear dimensional change of Design B was significantly less than those of Designs C and D (p < .05), and that of Design E was significantly less than that of Design D (p < .05).

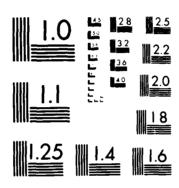
Multiple pairwise comparison analyses of each design at Location A-C at Time 3 revealed that the linear dimensional change of Design A was significantly less than those of Designs C and D op a .050. Similar analysis revealed that the linear firmensional course it Design B was significantly less than that of Design C or

Whitiple pairwise comparison analyses of each design at least no better time or revealed that the linear dimensional camps to estimate was admittantly less than those of Designs C and the linear dimensional analysis revealed that the linear dimensional captures are also as a significantly less than Design

where we consider a respect to the strength of the sign at the construction of the strength of the sign A was significantly that the construction of the sign A was significantly and the strength of the sign A was significantly that the strength of the sign B was according to the strength of the sign B was according to the strength of the signs C and D (p < .05); and the strength of the signs C and D (p < .05); and

Multiple pairwise comparison analyses of each design at La ation 2 at Time 4 revealed that the linear dimensional





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change of Design A was significantly less than those of Design C, D, and E (p < .05). Similar analysis revealed that the linear dimensional change of Design B was significantly less than those of Designs C and D (p < .05); and those of Design C and Design E were significantly less than that of Design D.

Multiple pairwise comparison analyses of each design at Location A-C at Time 4 revealed that the linear dimensional change of Design A was significantly less than Designs C and D (p < .05). Similar analysis revealed that the linear dimensional change of Design B was significantly less than that of Design D (p < .05).

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Multiple pairwise comparison analyses of each design at Location B-D at Time 4 revealed that the linear dimensional change of Design A was significantly less than than of Design C (p < .05). Similar analysis revealed that the linear dimensional change of Design B was significantly less than those of Designs C and D (p < .05).

Multiple pairwise comparison analyses of each design at Location A-B at Time 5 (Two Week - Initial Measurement) revealed that the linear dimensional change of Design A was significantly less than those of Designs C, D, and E (p < .05). Similar analysis revealed that the linear dimensional change of Design B was significantly less than that of Design D (p < .05).

Multiple pairwise comparison analyses of each design at Location C-D at Time 5 revealed that the linear dimensional change of Design A was significantly less than those of Designs

C, D, and E (p < .05). Similar analysis revealed that the linear dimensional changes of Design B, Design C, and Design E were significantly less than that of Design D (p < .05).

Multiple pairwise comparison analyses of each design at Location A-C at Time 5 revealed no significant differences in linear dimensional changes between any of the designs (p < .05).

Multiple pairwise comparison analyses of each design at Location B-D at Time 5 revealed no significant differences in linear dimensional changes between any of the designs (p < .05).

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No significant interactions existed between storage condition and location across any of the time periods at p < .05 (see Table 5). However, it can be seen that significant differences existed for storage condition across two of the time periods at p < .05, and for location across all of the time periods at p < .05 (see Table 5).

Pairwise comparison analysis of storage condition at Time 4 (72 Hour minus Initial Measurement) revealed that specimens stored in a wet environment demonstrated less linear dimensional change than specimens stored in a dry environment (p < .05).

A similar pairwise comparison analysis of storage condition at Time 5 (Two Week minus Initial Measurement) revealed that specimens stored in a wet environment demonstrated significantly less linear dimensional change than specimens stored in a dry environment (p < .05).

Multiple pairwise comparison analyses of each location at Time 1 (On Cast minus Initial Measurement) revealed that the linear dimensional change at Location C-D was significantly greater than that at Location A-C (p < .05).

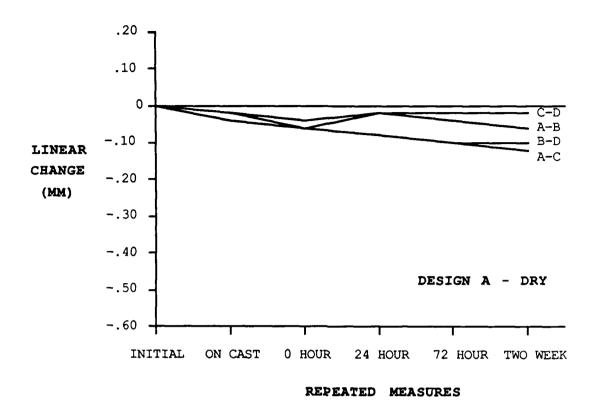
Multiple pairwise comparison analyses of each location at Time 2 (O Hour minus Initial Measurement), Time 3 (24 Hour minus Initial Measurement), and Time 4 (72 Hour minus Initial Measurement) revealed that the linear dimensional change at Location C-D was significantly greater than those at Locations A-B, A-C, and B-D (p < .05).

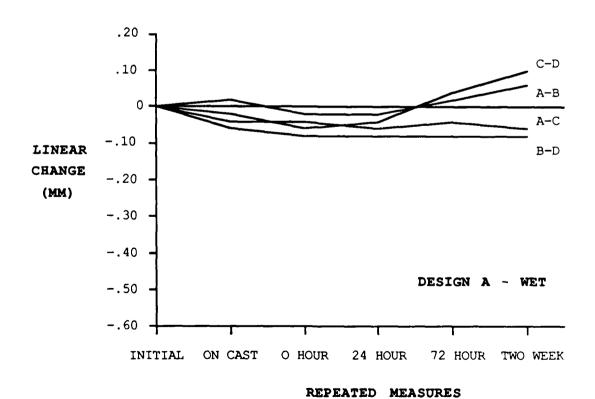
Multiple pairwise comparison analyses of each location at Time 5 (Two Week minus Initial Measurement) revealed that the linear dimensional change at Location C-D was significantly greater than those at Locations A-C and B-D (p < .05).

The statistical means for specimens stored in either a wet or dry condition (see Table 1) were computed and plotted in linear graph form. The line graphs (Figs. 1-5) provide a composite view of the cumulative linear dimensional changes for fabrication techniques and storage methods at the four locations across the time periods. The line graphs appear to show the range in dimensional stability of the different fabrication techniques and storage methods and to provide an indication of variation with time for the individual designs and storage conditions.

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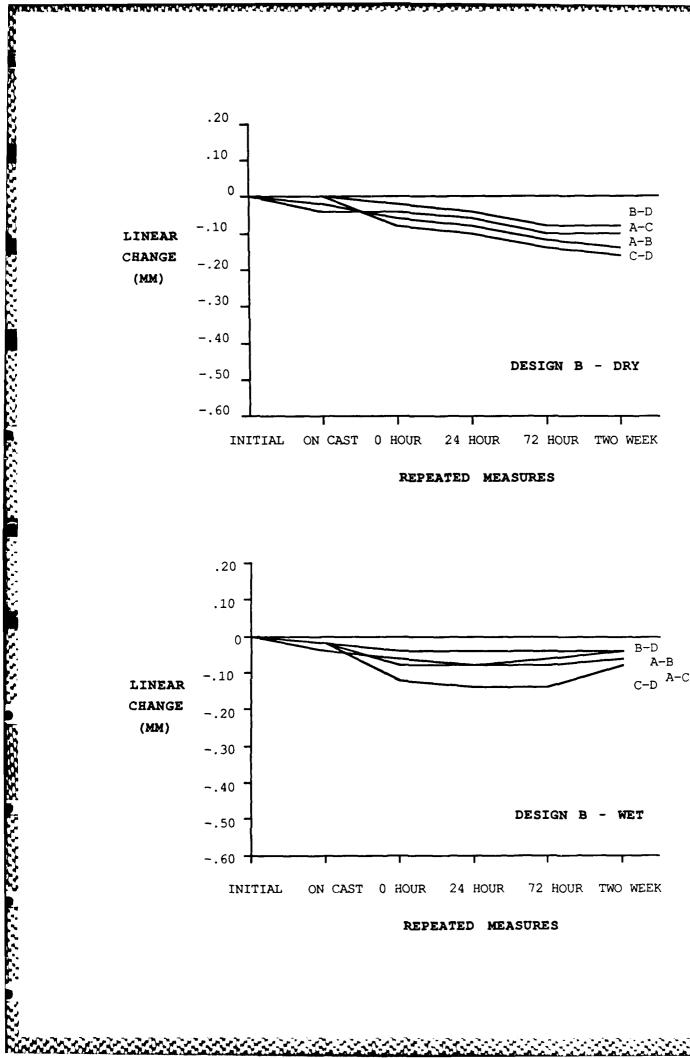
Figure 1. Line graphs of linear dimensional change of Design A for Dry versus Wet storage condition. Statistical means plotted for each location across time periods.

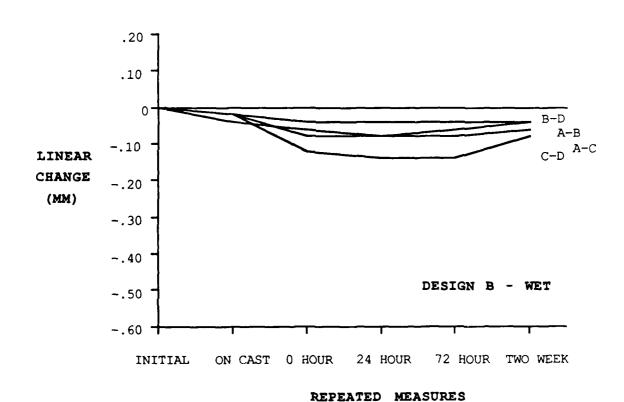




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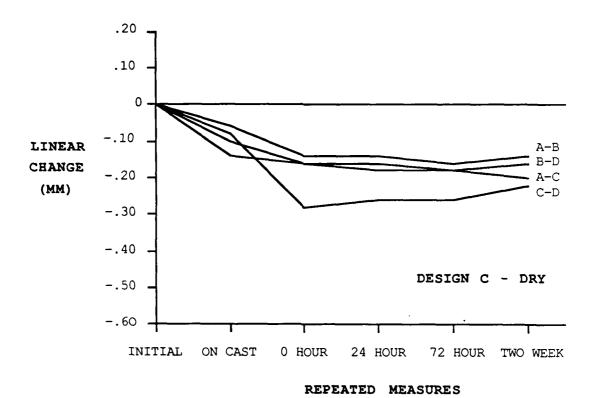
Figure 2. Line graphs of linear dimensional change of Design B for Dry versus Wet storage condition. Statistical means plotted for each location across time periods.



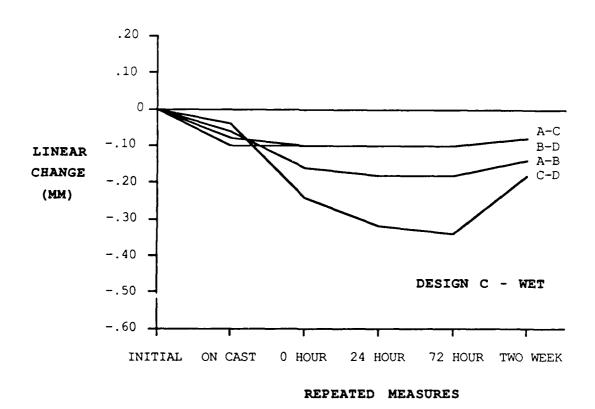


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Figure 3. Line graphs of linear dimensional change of Design C for Dry versus Wet storage condition. Statistical means plotted for each location across time periods.

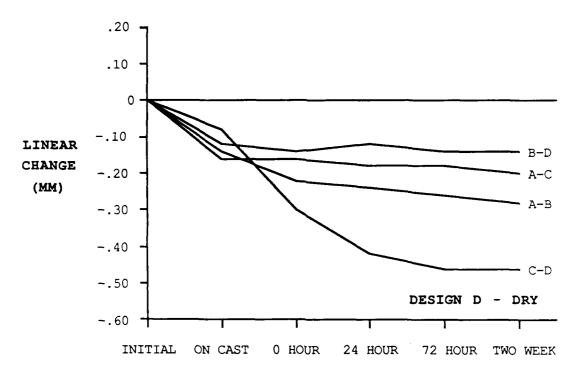


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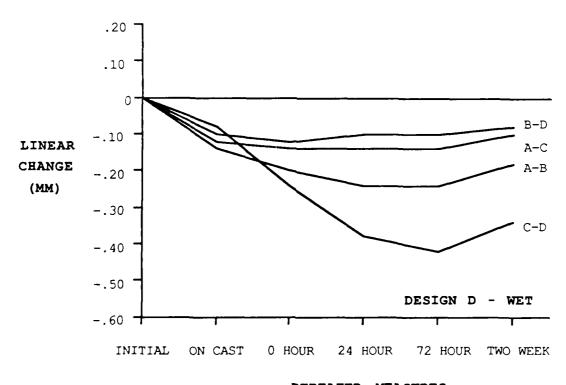
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Figure 4. Line graphs of linear dimensional change of Design D for Dry versus Wet storage condition. Statistical means plotted for each location across time periods.



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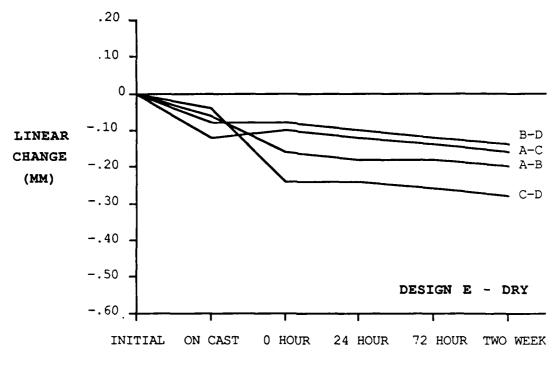
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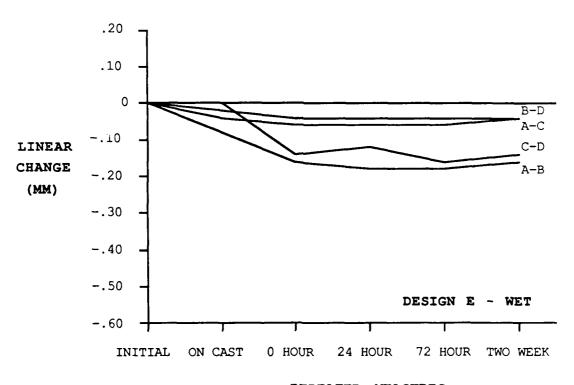
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Figure 5. Line graphs of linear dimensional change of Design E for Dry versus Wet storage condition. Statistical means plotted for each location across time periods.



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VI. DISCUSSION

When an acrylic resin is employed in a situation requiring dimensional precision, one of the properties given consideration is its stability. The accurate and precise fit an orthosis in the mouth of a patient is of prime importance the clinician. Consequently, any change in the dimensions of orthosis, either during fabrication or prior to delivery to patient, is of considerable importance. Since acrylic resins exhibit certain unavoidable dimensional changes, the clinician, as well as the laboratory technician, should understand the variables that can minimize inaccuracy of fit and subsequent distortion. These variables include, but are not limited to, construction materials. polymerization methods. fabrication techniques, and storage methods.

Recent comparisons of denture base acrylic resins (104,112), orthodontic base polymers (135), and autopolymerizing acrylic resin impression tray materials (39) have reported that different significantly affect construction materials dimensional stability. The materials utilized in these studies included autopolymerizing acrylic resins, heat-curing acrylic resins, visible light-curing acrylic resins. The materials utilized the present investigation were autopolymerizing acrylic resin (Design A, Design B, Design C), vacuum-adapted resin sheet and autopolymerizing acrylic resin (Design D), and heat-cured acrylic resin (Design E). Significant differences in linear dimensional

change at various time intervals were noted between fabrication techniques (p < .05) which utilized these various materials autopolymerizing acrvlic resin (if The construction. sprinkled-on) demonstrated less linear dimensional change the heat-cured acrylic resin. This finding supports the results of other investigations (52,104,112). It would seem that, light of the results of this study and others, the dimensional stability of removable acrylic resin orthoses may be influenced by the choice of materials utilized in the fabrication technique. Further research is indicated to determine if construction materials significantly affect the dimensional stability acrylic resin orthoses.

Recent evaluations of polymerization methods for polymerizing and heat-cured acrylic resins (41,106,132) polymerization methods observed that significantly affect dimensional stability. The polymerization methods involved the fabrication techniques in the present study were bench-curing in air (Design A, Design B, and Design C), curing in water under air pressure (Design D), and heat-curing (Design E). Significant differences in linear dimensional change at various time intervals were noted between fabrication techniques (p < .05) which utilized these different polymerization methods during construction. The specimens bench-cured in air (except Design C) demonstrated less dimensional change than specimens heat-cured or cured in water under pressure. It would seem that, especially in light of the results observed in this study, the dimensional

stability of removable acrylic resin orthoses may be influenced by the choice of polymerization method utilized in the fabrication technique. Further research is indicated to determine if polymerization methods significantly affect the dimensional stability of acrylic resin orthoses.

Recent comparisons of denture base acrylic resins (104), and orthodontic base polymers (135) evaluated the stability of these materials while employing modified production techniques. The authors made no comparisons with regard to significant effects of the modified production techinques. fabrication techniques involved in the present study autopolymerizing acrylic resin sprinkle-on additive techniques (Design A and Design B), autopolymerizing acrylic resin dough application technique (Design C), vacuum-adapted resin sheet and autopolymerizing acrylic resin dough application (Design D), and heat-cured acrylic resin denture processing Significant differences technique (Design E). in dimensional change at various time intervals were noted designs which utilized these different fabrication techniques during construction (p < .05). The one-stage sprinkle-on technique demonstrated less dimensional change than the application technique, the vacuum-adapted resin sheet and application technique, and the heat-cured denture processing technique. It would seem that, especially in light findings of this investigaton, the dimensional stability of

removable acrylic resin orthoses may be strongly influenced by the choice of fabrication technique.

An observation of the location of the dimensional changes of the specimens was of interest. The linear dimensional changes at locations A-B and C-D may be considered a reflection of linear distortion, defined as the percent change dependent on the of measurement. The linear dimensional changes at locations and B-D may be considered a reflection of linear shrinkage, defined as the uniform dimensional change independent of the site of measurement. Thus, relative distortion of the anterior posterior sections of the specimens may be judged by dimensional changes occuring at locations A-B and C-D as noted by Woelfel et al (153). If the contraction or expansion over the two distances A-B and C-D was greatly out of proportion, Woelfel assumed that the warpage would be high (153). In the present study, the linear dimensional change between the posterior reference points C-D was more apparent than the other locations. This finding is in agreement with Stafford et al (135) and conflict with that observed by Goodkind and Shulte (50).

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In this investigation, statistical analysis showed that significant differences existed between many of the fabrication techniques studied at all locations at all of the time periods. In particular, the sprinkle-on autopolymerizing acrylic resin techniques displayed less linear dimensional change than the other fabrication techniques across the dimension C-D at the 24 hour, 72 hour, and two week time intervals. It was also noted

that the vacuum-adapted resin sheet and autopolymerizing acrylic resin dough application technique displayed more linear dimensional change than all of the other techniques across the dimension C-D at the 24 hour, 72 hour, and two week time intervals.

From the results of this study, it may be concluded that order to minimize the linear dimensional change of a removable acrylic resin orthosis after construction on a die-stone removal. an autopolymerizing acrylic but prior to sprinkle-on additive fabrication technique (either one-stage three-stage) may be preferred over an auto-polymerizing acrylic resin dough application technique, a vacuum-adapted resin and autopolymerizing acrylic resin dough application or a heat-cured acrylic resin denture processing technique. Immediately after construction and removal from the cast, autopolymerizing acrylic resin sprinkle-on fabrication technique (either one-stage or three-stage) may be preferred over the other fabrication techniques studied. Within 24 hours, 72 hours, two weeks after construction and removal from the cast, autopolymerizing acrylic resin sprinkle-on fabrication (one-stage) may be preferred over the other fabrication techniques, except for the autopolymerizing acrylic three-stage sprinkle-on additive technique (Note: no statistical difference in linear dimensional change was observed between one-stage and three-stage techniques at any of the five intervals at p < .05).

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For the past 50 years, studies evaluating storage methods for denture base acrylic resins have concluded that storage methods significantly affect dimensional stability (92,100,130, 131,135,140,141,154). The storage methods investigated in the present study were a wet environment and a dry environment. Significant differences in the linear dimensional change of the specimens were noted between storage conditions at only one of the time intervals. Specimens stored in a wet environment demonstrated significantly less linear dimensional change after two weeks than specimens stored in a dry environment (p < .05). This finding supports the results of other investigations (92, 100,130,131,135,141,154), but is in conflict with those reported by Goodkind and Shulte (50).

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After saturation in water for two weeks the anticipated expansion took place for specimens stored in a wet condition, and this was very apparent at the posterior location C-D. In the case of the specimens fabricated by the one-stage sprinkle-on technique, the water immersion was sufficient to cause an expansion greater than the initial contraction and a final slight expansion occurred (see Table 1 and Figure 1). This observation is in agreement with the findings reported by Craig (32) and Ogle (104). They noted that autopolymerizing acrylic resin expands +0.01% across the posterior flange to flange dimension of maxillary dentures upon immersion in water for 10 days (104) to several months (32).

the basis of these observations, researchers suggested that this net positive dimensional change may cause autopolymerizing acrylic resin appliances to be slightly However, in the present study, net positive oversized (32). dimensional changes were observed only for the sprinkle-on autopolymerizing acrylic resin specimens (Design A) autopolymerizing acrylic resin specimens and not for the fabricated by either the three-stage sprinkle-on technique (Design B) or the dough application technique (Design C). If a slight expansion at the posterior dimension of an orthosis is desired, the results of this study suggest that the one-stage sprinkle-on technique may be preferred over the three-stage sprinkle-on or the dough application techniques.

Numerous empirical design features and construction techniques have been proposed and developed to cope with the inherent problems of distortion of removable acrylic resin orthoses. It is suprising to find that an investigation of empirical claims as to the advantages of a given fabrication technique has not appeared in the literature as of today. The five fabrication techniques evaluated in the present study were chosen as representative of those introduced in the literature with an empirical claim of superior properties, improved accuracy of fit, and greater dimensional stability (1,12,45,58,59,69,86,112).

The Design D specimens constructed in the present study were representative of orthoses in the literature describing a

vacuum-adapted resin sheet and autopolymerizing acrylic resin dough adapted to the resin sheet fabrication technique (12). The specimens constructed in this manner demonstrated significantly more linear dimensional change at all of the time periods than specimens fabricated using the three non-dough application techniques. In particular, Design D specimens demonstrated significantly more linear dimensional change than Design E specimens constructed by the heat-cured acrylic resin denture processing technique. Thus, Becker, Kaiser, and Lemm's claim of improved accuracy of fit and greater dimensional stability for their fabrication technique, when compared to the heat-cured denture processing technique (12), appears unfounded and clearly remains unsubstantiated.

It should also be noted that the vacuum-adapted resin sheet and acrylic resin dough application technique may have appeared clinically to be more accurate and precise in fit than the heat-cured processing technique due to the poor adaptation of the vacuum-adapted resin sheet to the stone cast. Lack of detail and initimate adaptation of the resin sheet to the stone cast may have allowed for much easier seating of the orthosis in the mouth, even if significant distortions had occurred as a result of the fabrication technique. On the other hand, the heat-cured processing technique, due to its intimate adaptation to the stone cast and natural teeth, could not have allowed for significant distortions without noticeable difficulty in seating the orthosis in the mouth.

The acrylic resin dough application technique (utilized Design C and D) may by itself not be the cause for the linear dimensional change noted at various time intervals. dimensional stability of Design C was comparable to Design B the later time intervals, yet demonstrated dimensional change at the earlier time periods. The Design fabrication technique incorporated a polymerization method that may have contributed to the greater linear dimensional change. Certainly, the literature presents conflicting results (106.132) as to whether autopolymerizing acrylic resin should be cured in water under air pressure. It should be noted that Design C specimens were allowed to cure in air on a benchtop. research is indicated to determine if polymerization methods significantly affect the dimensional stability of removable acrylic resin orthoses.

No statistically significant differences in linear dimensional change were noted between Design A and acrylic resin specimens at any of the locations at any of time intervals (p < .05). This finding suggests that incorporation of three segmental stages in a sprinkle-on technique for autopolymerizing acrylic resin does not seem to offer any advantages in terms of minimizing linear dimensional change when compared to a one-stage sprinkle-on fabrication Thus, any claim for improved accuracy of fit technique. greater dimensional stability for a segmental sprinkle-on fabrication technique (61), when compared to a single stage

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fabrication technique, appears unfounded and remains unsubstantiated.

A possible explanation for Design A and Design B fabrication techniques displaying similar dimensional stability might be that premature removal of the acrylic resin specimens from was avoided. The three die-stone research casts sprinkle-on technique (Design B) allowed 20 minutes for each segment to complete polymerization (a total of 60 minutes complete polymerization of the entire orthosis). Ιn fashion, the single stage sprinkle-on technique (Design A) allowed 60 minutes for the entire segment to complete polymerization (some laboratory technicians may routinely allow only 20-30 minutes). As a result, this prolonged curing time may minimized distortion or warpage, thus dimensional stability of the acrylic resin research specimens fabricated by either the one-stage or three-stage segmental sprinkle-on techniques.

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Because of the advantages claimed for the visible light-cured acrylic resin materials (104) and a "simplified technique for occlusal splint fabrication" (60) introduced recently in the literature, an evaluation of their effects on dimensional stability may be considered desirable in the future. As a follow on to the present study, a comparison of the dimensional stability of orthoses constructed by either a sprinkle-on autopolymerizing acrylic resin technique or a visible light-cured acrylic resin technique is indicated.

By using original and precise research methodology, it appears that cumulative linear dimensional change may be evaluated to determine the relative dimensional stability of acrylic resin orthotic specimens constructed by different fabrication techniques. Whether or not the small differences noted in dimensional change will have any clinical importance remains to be investigated.

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The magnitude of the cumulative linear dimensional changes of the specimens in the present study varied widely, although not exceeding 0.5 millimeters. Clinical research is indicated to determine if changes of this amount significantly affect the fit of removable acrylic resin orthoses. Since adverse forces may be transmitted to teeth and supporting periodontal structures by orthoses, optimum design based on the best available research data may preserve the health of the teeth and periodontium.

The relationship between dimensional stability and fit produced by various construction methods and materials may seem evident, but is unsubstantiated. There should be little doubt that identification and evaluation of these fabrication techniques and materials through further research are vital to our understanding of the oral dynamics of these appliances.

VII. SUMMARY

Widely varying opinions exist among clinicians and researchers concerning the design and construction of interocclusal stabilization appliances (orthoses). Numerous fabrication techniques for orthoses have been introduced in the literature with empirical claims for improved accuracy of fit and greater dimensional stability.

The purpose of this study was to determine if fabrication techniques and storage methods affect the dimensional stability of removable acrylic resin orthoses. The primary objective of this investigation was to utilize five fabrication techniques and two storage methods (representative of those in the literature) to construct and store acrylic resin specimens, and to visualize and quantify their linear dimensional change at varying time intervals over a two week time period.

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The following results and conclusions can be drawn from this investigation:

- 1. No significant difference in linear dimensional change was noted between the one-stage and the three-stage sprinkle-on fabrication techniques at any of the locations at any of the time periods (p < .05).
- This result suggests that the incorporation of three segmental stages in a sprinkle-on technique for autopolymerizing acrylic resin does not seem to offer

- any advantages in terms of minimizing linear distortion when compared to a one-stage sprinkle-on technique.
- 3. The one-stage sprinkle-on technique (Design A) demonstrated significantly less dimensional change than the dough application (Design C), the vacuum-adapted resin sheet and dough application (Design D), and the heat-cured denture processing (Design E) techniques at location C-D for all five time periods (p < .05), except for the heat-cured denture processing technique (Design E) at Time 1.

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- 4. The heat-cured acrylic resin denture processing technique (Design E) demonstrated significantly less dimensional change than the vacuum-adapted resin sheet and dough application technique (Design D) at the posterior location C-D at all time periods (p < .05), except at Time 2.
- 5. All specimens stored in a wet environment demonstrated significantly less dimensional change two weeks after fabrication than specimens stored in a dry environment (p < .05).
- 6. These results suggest the laboratory utilization of an autopolymerizing acrylic resin sprinkle-on fabrication technique and a wet storage method to minimize distortion prior to the clinical use of a removable acrylic resin orthosis.

APPENDIX

RAW DATA FOR RESEARCH SPECIMENS

	ROITION	LOCATION	DESIGN	TIME 1	TIME 2	TIME 3	TIME 4	72:E 5
	WET	AB	A	. 3290	3540	3200	. 0090	.0380
2	WET	8	A	.0140	0620	1090	0500	.0140
3	WET	AC	A	0150	0560	0490	0490	0460
4	WET	BD	A	0160	0460	0070	0650	0520
5	DRY	AB	A	.0250	0350	0230	0380	3283
9	DRY	8	A	0330	0380	- 2460	0520	0640
	DRY	AC	A	- .0350	0600	0770	1030	1020
ਤੇ	DRY	BD	A	0700	0770	1050	1040	122 ₀
3	WET	AB	A	.0530	.0390	0180	.0010	.0390
1.0	WET	CD	A	0090	0570	C	0350	. 1030
	WET	AC	A	3150	0440	3500	3480	0520
	WET	30	A	3420	0650	3770	2720	3660
- 3	DRY	AB I	A	0170	0510	0740	0960	1220
14	DRY	CD	A	0050	0890	0820	3580	3073
::5	DRY	AC	A	. 2070	0290	0670	36001	<u> ~ 0900</u>
	DRY	BD	A	3060	0460	3860	-, 1903	1060
-:-	WET	AB	A	0270	3513	0020	.0470	.3740
: 3	WET	ಾ	A	0100	0260	.0860	.1290	1560
	WET	AC AC	A	3190	0310	0910		0380
- : : :	WET	QE	A	3430	3800	3660	3540	3550
	DRY	AB	A	.0080	0510	0190	0480	3630
-22	DRY	CD	A	0110	0770	0610	3900	1360
2.3	DRY	AC	A	0490	1000	1160	1220	1440
24	DRY	BD	A	0170	0620	0540	0720	3950
25	WET	AB	A	.0270	.0300	0350	0290	.3080
26	WET		A	.0120	0790	0670	0560	.0290
<u> </u>	WET	AC 50	A	0290	0490	J540	3450	3490
-	OF?	AB	A	- 3650	0860	0740	0930	- 0920
<u> </u>	DRY	7.5	A	-,3040	3600	0410	0480 .0130	3610
-	787	AC	A	0650	0310 0840	0800		.3235
1	DRY	BD	À	3250	0550	3680	3890 3730	1200 0980
-	WET	AB	A	.3010	0390	3130	.0010	.0575
7.4	WET	- <u> </u>	A	3070	104C	3680	0020	.1920
2.5	WET	AC	A	0260	0580	3580	0520	- 3560
3.5	WET	BD	A	J220	0630	3610	0530	2600
37	DRY	AB	A	0110	0540	0450	3550	3713
19	DRY	GD	A	0210	0510	0120	. 3090	3313
33	DRY	AC	A	0050	0370	0510	0530	3800
- :	CRY	BD	A	0290	0550	0740	0850	3890
41	WET	AB	В	3460	1040	1080	1130	3943
42	WET	CD	В	0280	1520	1750	2070	1350
43	WET	AC	В	3680	0870	0940	1010	3850
44	WET	BD	В	0170	- 0310	0370	0250	335c
45	DRY	AB	Э	0290	0970	0950	1120	1330
4.5	DRY	ග	В	3030	1030	1020	1240	1400
4.7	DRY	AC	В	3440	0670	3930	1070	- :::::
43	DRY	38	В	3270	0480	0660	~.0910	3980
4.5	WET	AB	Э	0140	0980	1070	1220	3913
<u></u>	WET		В	0330	1510	2010	1820	- 1190
51	WET	AC	В	0150	0490	0640	3590	3590
52	WET	BD	В	0420	0640	0830	0790	3660
1.3	DRY	AB	В	0290	0940	1030	1230	1550

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	CONDITION	TOCATION	DESTON	TIME 1	TIME 2	TIME 3	TIME 4	TIME 5
	CCNDITION	LOCATION	DESIGN	TIME I	11115 5	111/15 2	1 TT-1E 4	د عدید د
اجيا				0100	-1100	1200	1.630	1070
54	DRY	CB	В	0180	1120	1390	1630	1870
55	DRY	AC	В	0360	0660	0740	1000	1090
56	DRY	BD	В	0140	0520	0600	0790	0910
57	WET	AB	В	0010	0760	0650	0690	0420
58	WET	CD	В	0110	1400	1990	1790	0660
59	WET	AC	В	0090	0630	0710	0660	0730
60	WET	BD	В	0020	0380	0470	0450	0460
61	DRY	AB	В	.0250	0390 0370	0500	0580	0690 0670
62	DRY	CD	В	.0200		0410	0300	
63 64	DRY	AC BD	В	0160	0530	0660 0530	0730	0920 0810
65	DRY	BD	В	.0040	0350 0480	0420	0540 0160	0120
66	WET	AB	B					
67	WET	CD AC	В	0470	0570 0760	0620 0820	0340 0880	0560 0670
68	WET	BD	В	0030	0320	0420	0320	0300
69	DRY	AB	В	0190	0620	0960	1200	1450
70	DRY	CD	В	0050	0620	1080	1400	1590
71	DRY	AC	В	0150	0450	0730	0890	0940
72	DRY	BD	В	.0040	0280	0560	0720	0720
73	WET	AB	В	0260	0720	0670	0500	0220
74	WET	CD	В	0100	0770	0810	0880	.0070
75	WET	AC	В	0180	0480	0570	0550	0490
76	WET	BD	В	0010	0360	0480	0440	0320
77	DRY	AB	В	0140	0540	0890	1120	1310
78	DRY	СЪ	В	0040	0560	0970	1160	1490
79	DRY	AC	В	0140	0490	0760	0840	0930
80	DRY	BD	В	.0100	0280	0510	0650	0620
91	WET	AB	С	0680	1620	1620	1600	0920
82	WET	CD	C	0100	2060	2440	2600	0410
83	WET	AC	C	0780	0420	0350	0340	0220
84	WET	BD	С	0250	0500	0430	0490	0300
35	DRY	AB	С	0570	1800	1740	1850	1750
36	DRY	CD	С	0630	3230	3270	3220	2610
97	DRY	AC	С	1490	1670	1740	1870	1760
38	DRY	BD	С	0390	1610	1670	1870	1900
99	WET	AB	С	0200	1310	1620	1650	1130
30	WET	CD	C	.0170	1730	3790	4050	2700
91	WET	AC	C	0080	0350	0330	0360	0090
92	WET	BD	C	0980	1290	1330	1270	1010
93	DRY	AB	C	.0070	1190	1360	1480	1400
94	DRY	CD	C	0530	3250	3510	3660	3020
95	DRY	AC	C	1210	1360	1530	1580	1660
96	DRY	BD	С	0430	0980	0770	0980	1090
97	WET	AB	C	0260	1220	1330	1370	0730
98	WET	CD	C	0280	2510	3170	3190	1620
99	WET	AC	С	0310	0€30	0660	0630	0500
100	WET	BD	С	0600	0920	0840	0820	0590
101	DRY	AB	С	0420	1050	0890	0790	0730
102	DRY	CD	С	0390	1330	0200	.0080	.0340
103	DRY	AC.	C	1290	1360	1440	1390	1620
104	DRY	BD	С	0780	1510	1540	1610	1630
105	WET	AΒ	C	0590	1340	1740	1770	1230
106	WET	CD	C	0570	2550	3220	3530	1880

	CONDITION	LOCATION	DESIGN	TIME 1	TIME 2	TIME 3	TIME 4	TIME 5
107	WET	AC	С	1670	1660	1630	1500	1280
108	WET	BD	C	1190	1080	1080	1080	0840
109	DRY	AB	С	1850	2380	2340	2480	2280
110	DRY	CD	С	1180	2820	2820	2720	2220
111	DRY	AC	С	1480	1650	1830	1800	1730
112	DRY	BD	С	1250	1290	1360	1430	1460
113	WET	AB	С	1700	2540	2480	2500	2250
114	WET	CD	С	1190	3120	3550	3680	2500
115	WET	AC	С	1910	2080	2010	1900	1710
116	WET	BD	С	1280	1280	1210	1320	1040
117	DRY	AB	c	0170	0960	1210	1390	1500
118	DRY	CD	С	1450	3390	3670	3540	3230
119	DRY	AC	С	2170	2350	2410	2510	-,2630
120	DRY	BD	c	1960	1950	1940	2060	2010
121	WET	AB	D	1740	2200	2620	2670	2660
122	WET	CD	D	1030	2650	4080	4740	4640
123	WET	AC	D	1390	1300	1470	1370	1270
124	DRY	BD AB	D	1150 0780	1210 1420	1160 1420	1080 1440	1190 1530
126	DRY	CD		0570	1770	2020	2150	2100
127	DRY	AC	D	1060	1100	1090	1210	1440
128	DRY	BD	D	1420	1690	1630	1810	1770
129	WET	AB		1470	2250	2480	2510	1840
130	WET	CD	D	0790	2580	4030	4440	3270
131	WET	AC	D	1130	1470	1290	1330	1050
132	WET	BD	D	1110	1190	1230	1160	0900
133	DRY	AB	D	1710	2630	2830	3140	2980
134	DRY	CD	D	0740	~.3950	5490	5020	5940
	197	AC	D	1330	1440	1440	1530	1370
1.35	1.87	BD	0	1380	1520	1530	1640	1440
137	WET	AB	D	1520	2450	2730	2670	2140
138	WET	CD	0	0850	3590	5290	5790	4420
139	WET	AC.	D	1500	1630	1570	1810	1380
140	WET	90	D	1360	1650	1460	1250	1120
141	DPY	AB	D	2030	2020	3370	3840	4120
142	DRY	CD	D	1170	3920	5500	6080	6550
143	DRY	AC .	ס	1620	1680	1720	1900	2010
144	EFY	BD	ם	1300	2370	1340	1310	1520
145	WET	AB	٥	1370	1410	1610	1420	1130
146	WET	CD	D	0450	1300 1150	2020	2560 1050	2180 0810
147	WET	AC		1070	0650	1060 0640	1050	0480
149	DRY	BD AB	D D	0670 1140	1750	2260	2430	2600
150	DRY	CD	ם	1290	3140	4970	5030	4910
151	DRY	AC	D	2310	2150	2140	2340	2400
152	DRY	BD	0	0890	0800	0940	0990	1190
153	WET	AB	D	1390	1570	1960	1990	1430
154	WET	CD	D	0640	1990	3460	3980	3100
155	WET	AC	D	0840	0780	0940	0810	0630
156	WET	BD	D	0980	0900	0790	0810	0570
157	DRY	AB	D	1610	1960	2420	2450	2680
158	DRY	CD	D	0860	2450	3340	3630	3890
15)	DRY	AC	D	1690	1740	1930	1790	1970

	CONDITION	LOCATION	DESIGN	TIME 1	TIME 2	TIME 3	TIME 4	TIME 5
160	DRY	BD	_ D	0890	0960	1020	1050	1160
161	WET	AB	Ε	0880	1700	1740	1760	1620
162	WET	CD	E	.0220	1200	1210	1220	1020
163	WET	AC	Ε	0470	0480	0490	0540	0500
164	WET	BD	E	0150	0300	.0010	0330	0220
165	DRY	AB	E	0810	1610	1620	1680	2030
166	DRY	CD	Ē	0630	2770	2850	2820	3480
167	DRY	AC	E	0660	0620	0740	0900	1229
168	DRY	BD	ΕΕ	0510	0670	0750	0850	122
169	WET	AB	E	0240	1450	1370	1340	1170
170	WET	CD	E	0230	2540	2550	2420	1880
171	WET	AC	E	0110	0580	0530	0530	0520
172	WET	BD	E	0920	1280	1300	1380	128
173	DRY	AB	E	.0070	0950	1120	1130	1720
174	DRY	CD	E	0200	2590	2760	2760	3380
175	DRY	AC	E	0750	0810	0900	1010	1320
176	DRY	BD	E	0570	0670	0760	0920	1170
177	WET	AB	E	0310	1090	1250	1150	0970
178	WET	CD	E	.0250	0870	1200	1120	~.089
179	WET	AC	E	1470	1470	1650	1550	1500
180	WET	BD	E	0620	0760	0740	0770	0700
181	DRY	AB	E	.0200	0570	0590	0710	0860
182	DRY	CD	E	0090	1270	1190	1240	1129
183	DRY	AC	E	1230	1100	1200	1330	1600
184	DRY	BD	E	0510	0460	0660	0700	1060
185	WET	AB	E	0790	1590	1950	1980	1750
196	WET	CD	£	.0270	0950	1250	1260	~.0910
137	WET	AC	13	.0350	.0200	.0230	.0180	.0310
139	WET	BD	E	.0160	.0030	.0090	0030	.0050
189	DRY	AB	E	0720	1680	1770	1940	2100
130	DRY	CD	Ε	0690	2330	2320	2550	2840
131	DPY	AC	E	1620	1390	1450	1630	~.1920
190	D'RY	BD	Ē	0630	0580	0650	0800	1000
133	WET	AB	Ε	1290	1980	1880	1910	1730
124	WET	CD	E	0470	1670	2080	2170	1680
195	WET	AC	E	1000	0820	0820	0930	0760
136	WET	BD	E	0760	0780	0770	0740	074
197	DRY	AB	E	1780	2800	3010	-,2950	3089
139	DRY	CD	E	0260	2410	2340	2420	2630
133	DRY	AC	E	1110	1090	1080	1 `.7 2	1490
200	DRY	BD	Ε	1540	1530	1620	1790	198

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	CONDITION	LOCATION	INIT MEASURE	CN CAST	0 HOURS	24 HOURS	72 HOURS	ENEEM CWI
 								
1	TET	AB	36.438	36.467	36.384	36.418	36.447	36.476
2	WET	CD	50.107	50.121	50.045	49.998	50.057	50.121
3	WET	AC	27.047	27.032	26.991	26.998	26.998	27.001
4	WET	BD	26.838	26.822	26.792	26.771	26.773	26.786
5	DRY	AB	36.391	36.416	36.356	36.368	36.353	36.363
6	DRY	CD	50.109	50.142	50.071	50.063	50.057	50.045
7	DRY	AC	26.981	26.946	26.921	26.904	26.878	26.879
9	DRY	BD	26.901	26.831	26.824	26.796	26.797	26.773
2	WET	AB	36.361	36.414	36.400	36.343	36.362	36.400
10	WET	CD	50.082	50.073	50.025	50.082	50.117	50.185
11	WET	AC	26.822	26.807	26.778	26.772	26.774	26.770
1.2	WET	BD	26.930	26.888	26.865	26.853	26.858	26.862
13	DRY	AB	36.471	36.454	36.420	36.397	36.375	36.349
14	DRY	CD	50.128	50.123	50.039	50.046	50.070	50.121
1.5	DRY	AC .	27.020	27.027	26.991	26.953	26,360	26.340
16	DRY	BD	26.962	26.956	26.916	26.876	26.872	26.956
17	WET.	AB	36.472	36.445	36.421	36.470	36.519	36.546
13	WET	CD	49.992	49.982	49.966	50.078	50.120	50.149
19	WET	AC	26.953	26.934	26.922	26.862	26.917	26.915
20	WET	BD	26.893	26.850	26.813	26.827	26.839	26.838
21	DRY	AB	36.573	36.581	36.522	36.554	36.525	36.510
22	DRY	CD	50.191	50.180	50.114	50.130	50.101	50.055
23	DRY	AC.	26.917	26.868	26.817	26.801	26.795	26.773
24	DRY	BD	26.733	26.716	26.671	26.679	26.661	26.638
25	WET	AB	36.295	36.322	36.325	36.260	36.266	36.303
26	WET	CD	50.001	50.013	49.922	49.934	49.945	50.030
27	WET	AC	26.994	26.365	26.945	26.940	26.943	26.345
20	WET	BD	26.838	26.773	26.752	26,764	26.745	26.75-
	ERY	AB	36.439	36.444	36.379	36.398	36.331	36.374
30	DRY	CD	50.018	50.014	49.987	50.022	50.031	50.041
31	DRY	AC_	27.023	26.958	26.939	26.943	26.934	26.903
22	DEY	3 D	26.946	26.921	26.891	26.979	26.973	26.940
13	TEN	AB	36.452	36.459	36.414	36.433	36.453	36.50
34	WET	CD	50.007	50.000	49.903	49.939	49.398	50.193
35	WET	AC	26.964	26.938	26.906	26.906	26.912	26,303
36	WET	BD	26.393	26.971	26.930	26.932	26.940	26.33
37	SPY	AB	36.416	36.405	36.362	36.371	36, 161	36.345
30	DPY.	CD	50.102	50.081	50.051	50.090	50.111	50.133
30	£-RY	λC	26.846	26.841	26.809	26,195	26.793	26, 164
40	DPY	BD.	26.799	26.770	26.744	26.725	26.714	26.711
41	WET	AB	36.303	36.257	36.199	36.195	36.190	36.209
42	WET	CD	49.882	49.854	49.730	49.707	49.675	49.747
43	WET	AC	26.808	26.740	26.1.	26.714	26.707	26.723
44	WET	BD	26.750	26.733	26.719	26.713	26.725	26.715
45	DPY	AB	36.463	36.434	36.366	36.368	36.351	36.330
46	DRY	CD	50.081	50.078	49.978	49,974	49.957	49.341
47	DPY	AC	27.137	27.093	27.070	27.514	27.030	27,316
49	DPY	BD	26.761	26.734	26.713	26.695	26.670	26,663
49	WET	AB	36.451	36.437	36.353	36.344	36.329	36.360
50	WET	CD	50.095	50.062	49.944	49.894	49.913	49,977
51	WET	AC.	27.019	27.004	26.370	26.955	26,260	26,961
52	WET	BD	26.866	26.824	26.802	25,783	26.798	26,900
5.3	UPY	AB	36.435	36.406	36.341	36.332	36.307	36,230

	CONDITION	LOCATION	INIT MEASURE	ON CAST	0 HOURS	24 HOURS	72 HOURS	IMO MEEKS
54	DRY	CD	50.041	50.023	49.929	49.302	49.878	49,954
55	DRY	AC	27.034	26.998	26.968	26.960	26.934	26,925
56	DRY	BD	26.827	26.813	26,775	26.767	26.748	26,736
57	WET	AB	36.414	36.413	36.338	36.349	36.345	36.372
58	WET	CD	50.185	50.174	50.045	49.986	50.006	50.119
59	WET	AC	26.980	26.971	26.917	26.909	26.914	26.907
60	WET	BD	26.946	26.944	26.908	26.899	26.901	26,900
61	DRY	AB	36.362	36.387	36.323	36.312	36.304	36,293
62	DRY	CD	50.083	50.103	50.046	50.042	50.053	50.016
53	DRY	AC	27.023	27.007	26.970	26.957	26.950	26.931
54	DRY	BD	26.805	26.809	26.770	26.752	26.751	25.724
55	WET	AB	36.298	36.307	36.250	36.256	36.282	36.286
56	WET	CD	50.245	50.245	50.188	50.183	50.211	50.199
67	WET	AC	27.023	26.976	26.947	26.941	26.935	26.956
_68	WET	BD	26.848	26.845	26.816	26.806	26.816	26.819
53	DRY	AB	36.466	36.447	36.404	36.370	36.346	36.321
70	DRY	CD	50.172	50.167	50.110	50.064	50.032	50.013
71	DRY	AC	27.011	26.996	26.966	26.938	26.922	26.917
72	DRY	BD	26.684	26.688	26.656	26.628	26.612	26.612
73 74	WET	AB	36.419	36.393	36.347	36.352	36.369	36.397
75	WET	CD	50.030	50.020	49.953	49.949	49.942	50.037
	WET	AC	26.905	26.987	26.857	26.848	26.850	26.856
76	WET	BD	26.873	26.872	26.837	26.825	26.829	26.841
78	DRY	AB	36.382	36.368	36.328	36.293	36,270	36.251
79	DRY	CD	50.110	50.106	50.054	50.013	49.994	49.961
80	DRY	AC BD	26.901 26.932	26.887	26.852	26.825	26.817	26.808
81	WET	AB	36.378	36.310	26.904	25.881	26,867	26.870 36.296
32	WET	CD	50.008	49.998	36.216 49.802	36.216 49.764	36.218 49.748	49.367
33	WET	AC AC	27.073	26.995	27.031	27.038	27.039	27,051
84	WET	BD	26.745	26.720	26.695	26.702	26.696	25.715
85	DRY	AB	36.583	36.526	36.403	36.409	36.398	35.408
95	DRY	CD	50.073	50.010	49.750	49.746	49,751	49.812
97	DRY	AC	27.046	26.897	26.879	26.872	26.859	26.370
38	DRY	BD	26.856	26.817	26.695	26.689	26.669	25.656
83	WET	AB	36.362	36.342	36.231	36.200	36.197	36,249
90	WET	CD	50.167	50.184	49.994	49.788	49.762	49.897
31	WET	AC	26.932	26.924	26.897	26.899	26.896	26.923
92	WET	BD	26.914	26.816	26.785	26.781	26.787	26.813
93	DRY	AB	36.331	36.338	36.212	36.195	36.183	36.191
34	DRY	CD	50.204	50.151	49.879	49.853	49.838	49.902
95	DRY	AC	27.075	26.954	26.939	26.922	26.917	26.909
95	DRY	BD	26.908	26.865	26.810	26.831	26.810	26.799
97	WET	AB	36.403	36.377	36.281	36.270	36.266	36.330
98	WET	CD	50.188	50.160	49.937	49.871	49.869	50.026
99	WET	AC	27.115	27.084	27.052	27.049	27.052	27.065
100	WET	BD	26.702	26,642	26.610	26.618	26.620	26.643
101	DRY	AB	36.290	36.248	36.185	36.201	36.211	36.217
102	DRY	CD	50.192	50.153	50.059	50.172	50.200	50.226
103	DRY	AC	27.046	26.917	26.910	26.902	26.907	26.894
104	DRY	BD	26.903	26.825	26.752	26.749	26.742	26.740
105	WET	AB	36.347	36.288	36.213	36.173	36.170	36.218
106	WET	CD	49.978	49.921	49.723	49.656	49.625	49.730
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	CONDITION	LOCATION	INIT MEASURE	ON CAST	0 HOURS	24 HOURS	72 HOURS	TWO WEEKS
	COMPLITION	TOCALLON	ANTI PERSORE	014 0201	5 110070	24	.2 .100100	10
135	1.500		27.045	26.878	26.879	26.882	26.895	26.917
107	WET	AC	27.045				26.592	26.616
108	DRY	BD AB	26.700 36.576	26.581 36.391	26.592 36.338	26.592 36.342	36.328	36.348
110	DRY	CD	50.158	50.040	49.876	49.876	49.886	49.936
111	DRY	AC	27.032	26.884	26.867	26.849	26.852	26.859
112	DRY	BD	26,726	26.601	26.597	26.590	26.583	26.580
113	WET	AB	36.523	36.353	36.269	36.275	36.273	36.298
114	WET	8 8	50.187	50.068	49.875	49.832	49.819	49.937
115	WET	AC	27,077	26.886	26.869	26.876	26.887	26.906
116	WET	BD	26.964	26.836	26.836	26.843	26.832	26.860
117	DRY	AB	36.302	36.285	36.206	36.181	36.163	36.152
118	DRY	CD	50,012	49.867	49.673	49.645	49.658	49.689
119	DRY	AC	26,968	26.751	26.733	26.727	26.717	26.705
120	DRY	BD	26.878	26.682	26.683	26.684	26.672	26,677
121	WET	AB	36,575	36.401	36.355	36.313	36.308	36.309
122	WET	CD	50.180	50.077	49.915	49.772	49.706	49.716
123	WET	AC	27.071	26.932	26.941	26.924	26.934	26.944
124	WET	BD	26.865	26.750	26.744	26.749	26.757	26.746
125	DRY	AB	36.428	36.350	36.286	36.286	36.284	36.275
126	DRY	CD	50.098	50.041	49.921	49.896	49.883	49.888
127	DRY	AC	27.087	26.981	26.977	26.978	26.966	26.943
128	DRY	BD	26.934	26.792	26.765	26.771	26.753	26.757
129	WET	AB	36,386	36.239	36.161	36.138	36.135	36.202
130	WET	CD	50.068	49.989	49.810	49.665	49.624	49.741
131	WET	AC	26.984	26.871	26.837	26.855	26.851	26.879
132	WET	BD	26.813	26.702	26.694	26.690	26.697	25.723
133	DRY	AB	36.457	36.286	36.194	36.174	36.143	36.153
134	DRY	CD	50.084	50.010	49.689	49.535	49.482	49.490
1.35	DRY	AC	27.148	27.015	27.004	27.004	26.395	27.011
136	DRY	BD	27.077	26.939	26.925	26.924	26.913	26.933
137	WET	A.B	36.464	36.312	36.219	36.191	_36.197	36.250
133	WET	CD	50.043	49.958	49 694	49.5	49.464	49.601
133	WET	AC	27.190	27.040	27.027	27.033	27.009	27.052
140	WET	BD	26.831	26.695	26.666	26.685	26.706	26.713
141	DRY	AB	36.481	36.278	36.189	36.144	36.097	36.069
142	DRY	CD	50.181	50.064	49.789	49.631	49.573	49.526
143	DRY	AC	27.033 26.808	26.871 26.678	26.865 26.571	26.861 26.674	26.843 26.677	26.656 26.656
144	WET	AB	36.464	36.327	36.323	36.303	36.322	36.351
145	WET	CD	49.955	49.910	49.825	49.753	49.699	49.737
147	WET	ĀC	27.043	26.936	26.928	26.937	26,938	26.962
148	WET	BD	26.797	26.730	26.732	26.733	26.729	26.743
149	DRY	AB	36.408	36.294	36.233	36.182	36.165	36.148
150	DRY	CD	50.005	49.876	49.691	49.508	49.502	49.514
151	DRY	AC	27.109	26.878	26.894	26.895	26.875	26.869
152	DRY	BD	26,747	26.658	26.667	26.653	26.648	26.629
153	WET	AB	36.444	36.305	36.287	36.248	36.245	36.301
154	WET	CD	50.059	49.995	49.960	49.713	49.661	49.749
155	WET	AC	27.140	27.056	27.692	27.046	27.059	27.077
156	WET	BD	26.793	26.695	26.703	26.714	26.712	26.726
157	DRY	AB	36.409	36.248	36.213	36.167	36,164	36.141
158	DRY	CD	50.053	49.967	49.808	49.719	49.690	49.665
153	DRY	AC	27.205	27.036	27.031	27.012	27.026	27,008
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	CONDITION	LOCATION	INIT MEASURE	ON CAST	0 HOURS	24 HOURS	72 HOURS	TWO WEEKS
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160	DRY	BD	26.908	26.819	26.812	26.806	26.803	26.792
161	WET	AB	36.336	36.248	36.166	36.162	36.160	36.174
162	WET	CD	50.174	50.196	50.054	50.053	50.052	50.072
163	WET	AC	26.932	26.885	26.884	26.883	26.878	26.992
164	WET	BD	26.895	26.880	26.865	26.896	26.862	26.873
165	DRY	AB	36.214	36.133	36.053	36.052	36.046	36.011
166	DRY	CD	50.030	49.967	49.753	49.745	49.748	49.692
167	DRY	AC	26.898	26.832	26.836	26.824	26.808	26.776
168	DRY	BD	26.761	26.710	26.694	26.686	26.676	26.639
163	WET	AB	36.347	36.323	36.202	36.210	36,213	36,230
170	WET	CD	50.123	50.100	49.869	49.868	49.881	49.935
171	WET	AC	27.074	27.063	27.016	27.021	27.021	27.022
72	₩ET	BD	26.850	26.758	26.722	26.720	26.712	26.722
173	DRY	AB	36.558	36.565	36.463	36.446	36.445	36.386
174	DRY	CD	50.086	50.066	49.827	49.810	49.810	49.748
175	DRY	AC	27.022	26.947	26.941	26.932	26.921	26.890
176	DRY	BD	26.600	26.543	26.533	26.524	26.508	26.483
177	WET	AB	36.384	36.353	36.275	36.259	36.269	36.287
178	WET	CD	49.887	49.912	49.800	49.767	49.775	49.798
179	WET	AC	26.969	26.822	26.822	26.804	26.814	26.819
180	WET	BD	26.762	26.700	26.686	26.688	26.685	26.692
191	DRY	AB	36.241	36.261	36.184	36.182	36.170	36.155
192	DRY	CD	50.000	50.000	49.882	49.990	49.885	49.997
132	DRY	AC	26.979	26.856	26.869	26.859	25.846	26.819
134	DRY	BD	26.837	26.786	26.791	26.771	26.767	26.731
195	WET	AB	36.265	36.186	36.106	36.070	36.067	36.090
136	WET	CD	50.014	50.041	49.919	49.889	49.888	49.923
3 # 1	WET	AC	27.020	27.055	27.040	27.043	27.038	27.051
133	WET	BD	26.747	26.763	26.750	26.756	26.744	26.752
183	DRY	AB	36.450	36.378	36.282	36.273	36.256	36.240
130	DRY	CD	50.086	50.017	49.853	49.854	49.831	49.802
131	DRY	AC	27.101	26.939	26.962	26.956	26.938	26.309
1 +2	ERY	BD	26.739	26.676	26.681	26.674	26.553	26.633
193	WET	AB	36.478	36.349	36.280	36.290	36.287	36.305
194	WET	CD	50.173	50.125	50.006	49.965	49.956	50.005
195	WET	AC	26.997	26.897	26.915	26.915	26.304	26.921
136	WET	BD	26.765	26.689	26.687	26.688	26.691	26.691
197	DRY	AB	36.326	36.148	36.046	36.025	36.031	36.019
198	DRY	CD	50.055	50.029	49.814	49.821	49.813	49.792
133	DRY	AC	26.952	26.841	26.843	26.844	25,920	26.803
200	DRY	BD	26.866	26.712	26.713	26.704	26.687	26,568

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LITERATURE CITED

- Adams, H.F.: Fabrication of a maxillary occlusal treatment splint. <u>J. Prosthet. Dent.</u>, 42:106-111, 1979.
- 2. Agerberg, G. and Carlsson, G.E.: Late results of functional disorders of the masticatory system. J. Oral Rehab., 1:309-316, 1974.
- 3. Allen, D.L.: Accurate occlusal bite guards. Periodontics, 5:93-95, 1967.
- 4. Angle, E.H.: <u>Treatment of Malocclusion of the Teeth</u>, Seventh edition, S.S. White Company, Philadelphia, 1907.
- Anthony, D.H. and Peyton, F.A.: Evaluating dimensional accuracy of denture bases with a modified comparator. J. Prosthet. Dent., 9:683-692, 1959.

WHITE COUNTY WAS COME TO THE CONTRACT OF THE PROPERTY OF THE P

- 6. Anthony, D.H. and Peyton, F.A.: Dimensional accuracy of various denture base materials. J. Prosthet. Dent., 12:67-81, 1962.
- 7. Ash, M.M. and Ramfjord, S.P.: Occlusal splint (Bite plane). In An Introduction to Function Occlusion, W.B. Saunders Co., Philadelphia, 1982, p. 181-207.
- 8. Askinas, S.W.: Fabrication of an occlusal splint. J. Prosthet. Dent., 28:549-551, 1972.
- 9. Bates, R.E. and Atkinson, W.B.: Accurate and reproducible fabrication of anteriorly-repositioned occlusal splints.

 J. Nebraska Dent. Assoc., 58:13-15, 1982.
- 10. Bates, R.E., Lewis, J.E., and Atkinson, W.B.: Single-appointment occlusal splints. Gen. Dent., 2:44-46, 1984.
- 11. Beard, C.C. and Clayton, J.A.: Effects of occlusal splint therapy on TMJ dysfunction. J. Prosthet. Dent., 44:324-335, 1980.

- 12. Becker, C.M., Kaiser, D.A., and Lemm, R.B.: A simplified technique for fabrication of night guards. J. Prosthet. Dent., 32:582-589, November 1974.
- 13. Beemsterboer, P.L., McNamara, D.C., Holden, S., Ash, M.M.: The effect of bite plane splint on the electromyographic silent period duration. J. Oral Rehab., 3:349-352, 1976.
- 14. Bell, W.H.: Nonsurgical management of the pain-dysfunction syndrome. J. Amer. Dent. Assoc., 79:161-170, 1969.
- 15. Bessette, R., Bishop, B., Mohl, N.: Duration of masseteric silent period in patients with TMJ syndrome. J. Applied Physiology, 30:864-869, 1971.
- 16. Block, L.S.: Diagnosis and treatment of disturbances of the temporomandibular joint especially in relation to vertical dimension. J. Amer. Dent. Assoc., 34:253-260, 1947.

- 17. Block, P.L.: The direct functional chew-in technique in the construction of bite guards. <u>J. Periodont.</u>, 47:238-240, 1976.
- 18. Block, S.L., Apfel, M., Laskin, D.M.: The use of a Resilient Latex Rubber Bite Appliance in the Treatment of MPD Syndrome. IADR Abstracts #71, p. 92, 1978.
- 19. Boucher, C.O.: <u>Current Clinical Dental Terminology</u>, Second edition, C.V. Mosby Co., 1974.
- 20. Brayer, L. and Erlich, J.: The night guard: its uses and dangers of abuse. J. Oral Rehab., 3:181-184, 1976.
- 21. Campbell, J.: Extension of the temporomandibular joint space by methods derived from general orthopedic procedures. J. Prosthet. Dent., 7:386-399, 1957.
- 22. Carlsson, G., Ingervall, B., Kocak, G.: Effect of increasing vertical dimension on the masticatory system in subjects with natural teeth. <u>J. Prosthet. Dent.</u>, 41:284-289, 1979.

- 23. Carraro, J.J., Caffesse, R.G.: Effect of occlusal splints on TMJ symptomatology. J. Prosthet. Dent., 40:563-566, 1978.
- 24. Caul, A.J. and Schoonover, I.C: A method for determining the extent of polymerization of acrylic resins and its applications for dentures. J. Amer. Dent. Assoc., 39:1-9, 1949.

STATE OF THE STATE

- 25. Christiansen, L.V.: Effect of occlusal splint on integrated electromyography of masseter muscle in experimental tooth clenching in man. J. Oral Rehab., 9:848-849, 1981.
- 26. Clark, G.T., Beemsterboer, P.L., Solberg, W.K., Rugh, J.D.:
 Nocturnal electromyographic evaluation of myofascial pain
 dysfunction in patients undergoing occlusal splint
 therapy. J. Amer. Dent. Assoc., 99:607-611, 1979.
- 27. Clark, G.T.: A critical evaluation of orthopedic interocclusal appliance therapy: design, theory, and overall effectiveness. J. Amer. Dent. Assoc., 108:359-363, 1984.
- 28. Clark, G.T.: A critical evaluation of orthopedic interocclusal appliance therapy: effectiveness for specific symptoms. J. Amer. Dent. Assoc., 108:364-368, 1984.
- 29. Cohen, S.R.: Follow-up evaluation of 105 patients with myofascial pain-dysfunction syndrome.

 Assoc., 97:825-828, 1978.
- 30. Costen, J.B.: A syndrome of ear and sinus symptoms dependent upon disturbed function of the temporomandibular joint.

 Ann. Otol. Rhin. and Laryn., 43:1-15, 1934.
- 31. Courant, P.: Use of removable acrylic splints in general practice. J. Can. Dent. Assoc., 33:494-501, 1967.
- 32. Craig, R.G.: Restorative Dental Materials, Sixth edition, C.V. Mosby Co., St. Louis, 1980, p. 358-375.
- 33. Crispin B.J., Myers G.E., Clayton J.A.: Effects of occlusal therapy on pantographic reproducibility of mandibular border movements. J. Prosthet. Dent., 40:29-34, 1978.

- 34. Davis, W.M. and Buchs, A.U.: Palatal stent after torus removal. J. Oral Surg., 37:680-681, 1979.
- 35. Dolwick, M.F. and Riggs, R.R.: Treatment of internal derangements of the TMJ. <u>Dent. Clin. North Amer.</u>, 27:567-569, 1983.
- 36. Drago, C.J., Rugh J.D. and Barghi, N.: Nightguard Vertical Thickness Effects on Nocturnal Bruxism. IADR Abstracts #901, p. 317, 1979.
- 37. Dyer, E.H.: Importance of a stable maxillomandibular relation. J. Prosthet. Dent., 30:241-251, 1973.
- 38. Farrar, W.B.: Differentiation of temporomandibular joint dysfunction to simplify treatment. <u>J. Prosthet.</u> <u>Dent.</u>, 28:629-635, 1972.
- 39. Fehling, A.W., Hesby, R.A., and Pelleu, G.B.: Dimensional stability of autopolymerizing acrylic resin impression trays. J. Prosthet. Dent., 55:592-597, 1986.

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- 40. Franks, A.S.T.: Conservative treatment of temporomandibular joint dysfunction: a comparative study. <u>Dent. Practice</u>, 15:205-210, 1965.
- 41. Furnish, G.M., O'Toole, T.J., and vonFraunhofer, J.A.: The polymerization of acrylic resin orthodontic protheses.

 J. Prosthet. Dent., 49:276-278, 1983.
- 42. Gaurisas, V.S.: Dynamic splints for rehabilitation after surgical treatment of ankylosis. <u>J. Oral Surg.</u>, 33:790-791, 1975.
- 43. Gecker, L.M. and Weil, R.B.: Bruxism a rationale of therapy. J. Amer. Dent. Assoc., 66:14-18, 1963.
- 44. Gelb, Harold: An orthopedic approach to occlusal imbalance and temporomandibular joint dysfunction. Dent. Clin. North Amer., 23:181-197, 1979.

- 45. Gilboe, D.B.: Posterior condylar displacement: Prosthetic therapy. J. Prosthet. Dent., 49:549-553, 1983.
- 46. Gjerde, K., Clark, G.T. and Solberg, W.K.: A technique for construction of a temporomandibular occlusal stabilization splint (orthotic appliance). Quintessence Dent. Tech., 5:43-52, 1981.
- 47. Glossary of Occlusal Terms, Second edition, International Academy of Gnathology, 1985, p. 28.
- 48. Goharian, R.K. and Neff, P.A.: Effect of occlusal retainers on temporomandibular joint and facial pain. J. Prosthet. Dent., 44:206-208, 1980.

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- 49. Goodfriend, D.J.: Symptomatology and treatment of abnormalities of the mandibular articulation. Dent. Cosmos, 75:1106-1111, 1933.
- 50. Goodkind, R.J. and Schulte, R.C.: Dimensional accuracy of pour acrylic resins and conventional processing of cold-curing acrylic resin bases. J. Prosthet. Dent., 24:662-667, 1970.
- 51. Goodman, P., Greene, C.S., and Laskin, D.M.: Response of patients with myofascial pain-dysfunction syndrome to mock equilibration. <u>J. Amer. Dent. Assoc.</u>, 92:755-758, 1976.
- 52. Graber, T.M.: Overbite the dentist's challenge. J. Amer. Dent. Assoc., 79:1135-1145, 1979.
- 53. Graf, Hans: Bruxism. <u>Dent. Clin. North Amer.</u>, 13:659-665, 1969.
- 54. Greenberg, M.S., Cohen, S.G., Springer, P., Kotwick, J.E., Vegso, J.J.: Mandibular position and upper body strength: a controlled clinical trial. J. Amer. Dent. Assoc., 103:576-579, 1981.
- 55. Greene, C.S. and Laskin, D.M.: Splint therapy for the myofascial pain-dysfunction (MPD) syndrome: a comparative study. J. Amer. Dent. Assoc., 84:624-628, 1972.

- 56. Greene, C.S. and Laskin, D.M.: Long-term evaluation of conservative treatment for myofascial pain-dysfunction syndrome. J. Amer. Dent. Assoc., 89:1365-1368, 1974.
- 57. Greene, C.S., Lerman, M.D., Sutcher, H.D., and Laskin, D.M.: The TMJ pain-dysfunction syndrome: heterogeneity of the patient population. J. Amer. Dent. Assoc., 79:1168-1172, 1969.
- 58. Grunewald, A.H., Paffenbarger, G.C., and Dickson, G.: The effect of molding processes on some properties of denture resins. J. Amer. Dent. Assoc., 44:269-282, 1952.
- 59. Grupe, H.E. and Gromek, J.J.: Bruxism splint: technique using quick cure acrylic. <u>J. Periodontol.</u>, 30:156-157, 1959.
- 60. Haddix, J.E.: A simplified technique for occlusal splint fabrication. J. Prosthet. Dent., 57:249-251, 1987.

CONTRACTOR PROPERTY SUSSESSE VINESSES, CONTRACTOR CONTR

- 61. Hartman, G.E. and Swepston, J.H.: Mandibular stabilization prosthesis. J. Prosthet. Dent., 48:215-219, 1982.
- 62. Hawley, C.A.: A removable retainer. <u>Int. J. Ortho. and Oral Surg.</u>, 5:291-300, 1919.
- 63. Hayashi, R.K., Chaconas, S.J., and Caputo, A.A.: Effects of force direction on supporting bone during tooth movement.

 J. Amer. Dent. Assoc., 90:1012-1017, 1975.
- 64. Holborow, D.W.: A protector for palatal donor sites after gingival grafting. J. Periodontol., 48:11-13, 1979.
- 65. Horn, Rosemarie: Economical construction of bite planes for symptomatic treatment of temporomandibular joint dysfunction. Quintessence Inter., 4:71-74, 1973.
- 66. Ingersoll, W.B. and Kerens, E.G.: A treatment for excessive occlusal trauma or bruxism.

 J. Amer. Dent. Assoc.,
 44:22-26, 1952.

- 67. Jakush, J.: Divergent Views: Can dental therapy enhance athletic performance? J. Amer. Dent. Assoc., 104:292-298, 1982.
- 68. Kaban, L.B., Swanson, L.T., Murray, J.E. and Sheridan, W.:
 Postoperative physiotherapy device for mandibular
 hypomobility. Oral Surg., 43:513-516, 1977.
- 69. Karolyi, M.: Beobachtungen uber pyorrhea alveolaris.

 <u>Oester-Ungar Vierteljahrsschr Zahnheilk</u>, 17:259, 1901.
- 70. Karolyi, M.: Treatment of oral soft tissue disease.

 Oestriche Ungarishe Vierteljahrschrift Zahnheilkunde,
 22:226-230, 1906.
- 71. Kass, C.A. and Tregaskes, J.N.: Occlusal splint fabrication.
 J. Prosthet. Dent., 40:461-463, 1978.
- 72. Kawazoe, Y., Kotani, H., Hamada, T. and Yamada, S.: Effect of occlusal splints on the electromyographic activities of masseter muscles during maximum clenching in patients with myofascial pain-dysfunction syndrome. J. Prosthet. Dent., 43:578-580, 1980.

- 73. Kent, J., Reid, R. and Hinds, E.C.: Use of acrylic splint without intermaxillary fixation for anterior alveolar osteotomy. J. Oral Surg., 27:11-14, 1969.
- 74. Kingsley, N.W.: Oral Deformities. A treatise on oral deformities as a branch of mechanical surgery, Appleton-Century Company, New York, 1880.
- 75. Klineberg, I.: Occlusal splints: a critical assessment of their use in prosthodontics. <u>Australian Dent. J.</u>, 28:1-8, 1983.
- 76. Kornfeld, Max: Acrylic resin bite guards. In Mouth Rehabilitation: Clinical and Laboratory Procedures, Volume One, Second edition, C.V. Mosby Co., St. Louis, 1974, p. 188-189.

- 77. Kovaleski, W.C. and De Boever, J.: Influence of occlusal splints on jaw position and musculature in patients with temporomandibular joint dysfunction. J. Prosthet. Dent., 33:321-327, 1975.
- 78. Kuebker, W.A.: Personal communication, November, 1985.

ESSENTIAL SANDOON LOGISSISSE ISSUIDAN CANADAGA VALLARA

- 79. Lackie, F.F.: The night guard. <u>J. Can. Dent. Assoc.</u>, 26:262-266, 1960.
- 80. Langer, B.: The immediate palatal plate. <u>J. Prosthet.</u> <u>Dent.</u>, 34:422-427, 1975.
- 81. Laskin, D.M.: Etiology of the pain-dysfunction syndrome. <u>J. Amer. Dent. Assoc.</u>, 79:147-153, 1969.
- 82. Lederman, K.H. and Clayton, J.A.: Patients with restored occlusions. Part III: The effect of occlusal splint therapy and occlusal adjustments on TMJ dysfunction.

 J. Prosthet. Dent., 50:95-99, 1983.
- 83. Lerman, M.D.: The hydrostatic appliance: a new approach to treatment of the TMJ pain-dysfunction syndrome. J. Amer. Dent. Assoc., 89:1343-1350, 1974.
- 84. Lerman, M.D.: A complete hydrostatically derived treatment procedure for the TMJ pain-dysfunction syndrome. J Amer. Dent. Assoc., 89:1351-1357, 1974.
- 85. Levenson, M.F.: Relieving intraoral pressures generated during orthopedic treatment. J. Prosthet. Dent., 49:546-548, 1983.
- 86. Levine, W.A., Hoek, C.B., and Fenster, R.K.: An occlusal prothesis to assure airway patency in the comatose patient. J. Prosthet. Dent., 44:451-452, 1980.
- 87. Louis, I.: Treatment of TMJ syndrome by pivots. <u>J. Prosthet. Dent.</u>, 40:179-182, 1978.

- 88. Lundeen, T.F.: Occlusal splint fabrication. <u>J. Prosthet.</u>
 Dent., 42:588-591, 1979.
- 89. Macko, D.J. and Kazmierski, M.R.: Stabilization of traumatized anterior teeth. J. Dent. Child., 44:46-48, 1977.
- 90. Magnusson, T. and Carlsson, G.E.: Treatment of patients with functional disturbances in the masticatory system. A survey of 80 consecutive patients. Swed. Dent. J., 4:145-153, 1980.
- 91. Manns, A., Miralles, R., Valdívia, J., and Santande, A.: Influence of occlusal splint adjusted to different vertical dimensions on electromyographic activity, during maximal clenching in patients with MPD syndrome. IRCS Medical Science, 9:848-849, 1981.
- 92. McCracken, W.L.: Evaluation of activated methyl methacrylate denture base materials. J. Prosthet. Dent., 2:68-74, 1952.

CONTRACTOR PRODUCES CONTRACTOR CO

- 93. McNeill, Charles: Diagnostic and treatment appliances. In Dental Laboratory Procedures: Fixed Partial Dentures, Volume II, Harold F. Eissmann, Kenneth D. Rudd, and Robert M. Morrow, C.V. Mosby Co., St. Louis, 1980, p. 327-346.
- 94. Miller, B.F. and Keane, C.B.: <u>Encyclopedia and Dictionary of Medicine and Nursing</u>, W.B. Saunders Co., 1972.
- 95. Mincey, D.L., Barnhart, G.W., and Olson, R.E.: A simplified exerciser for the temporomandibular joint following condylotomy. Oral Surg., 39:844-847, 1975.
- 96. Moini, M.R., McCall, W.D. and Mohl, N.D.: Jaw muscle silent periods: The effect of acrylic splints. J. Dent. Res., 59:683-688, 1980.
- 97. Mongini, Franco: Condylar remodeling after occlusal therapy.

 J. Prosthet. Dent., 43:568-577, 1980.

- 98. Mongini, Franco: Combined method to determine the therapeutic position for occlusal rehabilitation. <u>J. Prosthet. Dent.</u>, 47:434-439, 1982.
- 99. Moran, J.H., Kaye, L.B. and Fritz, M.E.: Statistical analysis of an urban population of 236 patients with head and neck pain. Part III: treatment modalities. J. Periodontol., 44:206-208, 1979.
- 100. Mowery, W.E., Burns, C.L., Dickson, G. and Sweeney, W.T.:
 Dimensional stability of denture base resins. J. Amer.
 Dent. Assoc., 57:345-353, 1958.
- 101. Newton, A.V.: Predisposing causes for temporomandibular joint dysfunction. <u>J. Prosthet. Dent.</u>, 22:647-651, 1969.
- 102. Noyek, A.M. and Winnick, A.N.: An acrylic protector in perioral endoscopy. <u>J. Otolaryngol.</u>, 5:86-88, 1976.
- 103. Odenheimer, K.J.: The myotatic splint: a new concept in the treatment of periodontal disease, TMJ disturbances, and associated syndromes. J. Dent. Med., 17:168-175, 1962.

- 104. Ogle, R.E., Sorensen, S.E., and Lewis, E.A.: A new visible light-cured resin system applied to removable prosthodontics. J. Prosthet. Dent., 56:497-506, 1986.
- 105. Okeson, Jeffrey: Biteguard Therapy and Fabrication. In Advances in Occlusion, Postgraduate Dental Handbook Series, Volume 14, John Wright-PSG, Inc., Boston, 1982, p. 220-226.
- 106. O'Toole, T.J., Furnish, G.M., and vonFraunhofer, J.A.: Linear distortion of acrylic resin. J. Prosthet. Dent., 53: 53-55, 1985.
- 107. Ottolengui, Rodrigues: Is it possible to jump the bite?

 <u>Dent. Cosmos</u>, 42:143-150, 1900.
- 108. Parker, M.W., Pelleu, G.B., Blank, L.W., and Breton, R.W.:
 Muscle strength related to use of interocclusal splints.
 Gen. Dent., March 1984, p. 105-109.

- 109. Perlow, Jack: Bruxism: treatment of a case. <u>Dent. Digest</u>, 64:434-436, 1958.
- 110. Perry, H.T.: Muscular changes associated with temporomandibular joint dysfunction. J. Amer. Dent. Assoc., 54:644-653, 1957.
- 111. Peyton, F.A. and Anthony, D.H.: Evaluation of dentures processed by different techniques. J. Prosthet. Dent., 13:269-282, 1963.
- 112. Phillips, R.W.: Physical properties of denture base resins.

 In Skinner's Science of Dental Materials, Eighth edition,
 W.B. Saunders Co., Philadelphia, 1982, p. 219.
- 113. Posselt, Ulf: The temporomandibular joint syndrome and occlusion. J. Prosthet. Dent., 25:432-438, 1971.
- 114. Posselt, U. and Wolff, I.B.: Treatment of bruxism by bite guards and bite planes. J. Can. Dent. Assoc., 29:773-778, 1963.
- 115. Ramfjord, S.P. and Ash, M.M.: Occlusion, Second edition, W.B. Saunders Co., Philadelphia, 1971, p. 248-250.

THE CONTRACTOR SERVING PROPERTY OF THE PROPERT

- 116. Ramfjord, S.P. and Ash, M.M.: Biteplanes. In <u>Occlusion</u>, Third edition, W.B. Saunders Co., Phildelphia, 1932, p. 519-525.
- 117. Rehany, Aliza and Stern, Noah: The modified Hawley occlusal splint. J. Prosthet. Dent., 48:536-541, 1981.
- 118. Ricketts, R.M.: Clinical implications of the temporo-mandibular joint. Am. J. Ortho., 52:416-422, 1966.
- 119. Rodriguez, C.A. and Arreachea, G.: Periodontal distribution of occlusal forces: a photoelastic study. J. Periodontol., 44:485-488, 1973.

- 120. Roura, Nelson and Clayton, Joseph: Pantographic records on TMJ dysfunction subjects treated with occlusal splints: A progress report. <u>J. Prosthet. Dent.</u>, 33:442-453, 1975.
- 121. Schoenwald, I.S., Scott, R.K., and Lance, L.: Prefabricated orthoses. J. Amer. Orth. and Prosth. Assoc., 37:76, 1984.
- 122. Schubert, M.M., Guttu, R.L., Hunter, L.H., Hall, R., and Thomas, R.: Changes in shoulder and leg strength in athletes wearing mandibular orthopedic repositioning appliances. J. Amer. Dent. Assoc., 108:334-337, 1984.
- 123. Schwartz, Robert: The orthopedic splint. <u>J. Acad. Gen.</u> <u>Dent.</u>, Jul 1973, p. 34-38.
- 124. Schwartz, Robert: The orthopedic uni-splint. <u>J. Acad Gen.</u> <u>Dent.</u>, Sep 1973, p. 14-16.
- 125. Schwartz, R.A., Greene, C.S., and Laskin, D.M.: Personality characteristics of patients with myofascial pain-dysfunction (MPD) syndrome unresponsive to conventional therapy. J. Dent. Res., 58:1435-1439, 1979.
- 126. Sears, V.H.: Occlusal pivots. <u>J. Prosthet. Dent.</u>, 6:332-338, 1956.
- 127. Shankland, W.E.: Biteplane therapy: theory and fabrication.
 Ohio Dent. J., 54:40-46, 1980.
- 128. Shore, N. A.: A mandibular autorepositioning appliance. J. Amer. Dent. Assoc., 75:908-911, 1967.
- 129. Shulman, Jeremy: A technique for bite plane construction.

 J. Prosthet. Dent., 29:334-339, 1973.
- 130. Skinner, E.W. and Cooper, E.N.: Physical properties of denture resins: Part I. Curing shrinkage and water sorption. J. Amer. Dent. Assoc., 30:1845-1852, 1943.

PARAMONIA SEESAN SALANDA SALAN

- 131. Skinner, E.W. and Jones, P.M.: Dimensional stability of self-curing denture base acrylic resin. J. Amer. Dent. Assoc., 51:426-431, 1955.
- 132. Smith, D.E., Lord, J.L., and Bolender, C.L.: Complete denture relines with autopolymerizing acrylic resin processed in water under air pressure.

 Dent., 18:103-115, 1967.
- 133. Solberg, W.K., Clark, G.T., and Rugh, J.D.: Nocturnal electromyographic evaluation of bruxism patients undergoing short term splint therapy. J. Oral Rehab., 2:215-223, 1975.
- 134. Sorrin, Sidney: The use of fixed and removable splints in the practice of periodontia. Amer. J. Orth. and Oral Surg., 31:354-364, 1945.
- 135. Stafford, G.D., Bates, J.F., and Huggett, R.: A review of the properties of some orthodontic base polymers. J. Dent., 11:294-305, 1983.
- 136. Stahl, D.G.: A simplified procedure for fabricating a temporary removable acrylic bite plate. J. Periodontol., 26:118-119, 1956.
- 137. Strother, E.W. and Mitchell, G.E.: Bruxism: a report and a case report. J. Dent. Med., 9:189-199, 1954.
- 138. Super, S: A modified occlusal splint for segmental osteotomy fixation. <u>J. Oral Surg.</u>, 35:238, March 1977.
- 139. Sved, Alexander: Changing the occlusal level and a new method of retention. Amer. J. Orth. and Oral Surg., 30:527-535, 1944.
- 140. Sweeney, W.T.: Denture base material: Acrylic resins. <u>J.</u>
 Amer. Dent. Assoc., 26:1863-73, 1939.
- 141. Sweeney, W.T., Paffenbarger, G.C., and Beall, J.R.: Acrylic resins for dentistry. J. Amer. Dent. Assoc., 29:7-33, 1942.

- 142. Timm, T.A. and Ash, M.M.: The occlusal bite plane splint: an adjunct to orthodontic treatment. J. Clin. Ortho., 11:383-390, 1977.
- 143. Tylman, S.D. and Malone, W.F.P.: <u>Tylman's Theory and Practice of Fixed Prosthodontics</u>, Seventh edition, C.V. Mosby Co., St. Louis, 1978, p. 295.
- 144. von Krammer, R.K.: Constructing occlusal splints. <u>J.</u>
 Prosthet. Dent., 41:105-108, 1979.
- 145. Wagner, E.P, Crandall, S.K., and Oliver, R.B.: Splints. In <u>Diseases of the Tempromandibular Apparatus</u>, Second edition, Douglas S. Morgan, Leland R. House, William P. Hall, and S. James Vamvas, C.V. Mosby Co., St. Louis, 1982, p. 265-276.

ISSUEGESCH TESSESSEN WOODERE STEERING TOOLOGGESTEN WOODERE

- 146. Weinberg, L.A.: Posterior bilateral condylar displacement: its diagnosis and treatment. J. Prosthet. Dent., 36:426-439, 1976.
- 147. Weinberg, L.A.: Treatment prostheses in TMJ dysfunction-pain syndrome. J. Prosthet. Dent., 39:654-668, 1978.
- 148. Weinberg, L.A.: The etiology, diagnosis, and treatment of TMJ dysfunction-pain syndrome Part II: Differential diagnosis. J. Prosthet. Dent., 43:58-70, 1980.
- 149. Weinberg, L.A.: The etiology, diagnosis, and treatment of TMJ dysfunction-pain syndrome. Part III: Treatment. J. Prosthet. Dent., 43:186-196, 1980.
- 150. Weinberg, L.A.: The role of stress, occlusion, and condyle position in TMJ dysfunction-pain. J. Prosthet. Dent., 49:532-545, 1983.
- 151. Williams, M., Chaconas, S., and Bader, P.: The effect of mandibular position on appendage muscle strength.

 Prosthet. Dent., 49:560-567, 1983.

- 152. Williamson, E.H., Evans, D.L., Barton, W.A. and Williams, B.H.: The effect of bite plane use on terminal hinge axis location. Angle Orthod., 47:25-31, 1977.
- 153. Woelfel, J.B., Paffenbarger, G.C., and Sweeney, W.T.:
 Dimensional changes occurring in dentures during
 processing. J. Amer. Dent. Assoc., 61:413-430, 1960.
- 154. Woelfel, J.B., Paffenbarger, G.C., and Sweeney, W.T.: Changes in dentures during storage in water and in service. J. Amer. Dent. Assoc., 62:643-657, 1961.
- 155. Yates, J.W., Koen, T.J., Semenick, D.M., and Kuftinec, M.M.:

 Effect of a mandibular orthopedic repositioning appliance
 on muscular strength. J. Amer. Dent. Assoc., 108:331-333,
 1984.
- 156. Zallen, R.D., Hought, R.T., and Preskar, M.: Occlusal acrylic index used to observe palatal bone cuts. Oral Surg., 47:16-18, 1979.

157. Zarb, G.A. and Thompson, G.W.: Assessment of clinical treatment of patients with temporomandibular joint dysfunction. J. Prosthet. Dent., 24:542-554, 1970.

VITA

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